

**OFFICE OF INTERNATIONAL SERVICES**  
Governors State University  
**STUDY ABROAD**

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Zip /Postal Code \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Major: \_\_\_\_\_

Minor: \_\_\_\_\_

Cumulative average: \_\_\_\_\_

Are you presently a GSU student? \_\_\_\_\_ Yes \_\_\_\_\_ No

Country of Interest

1<sup>st</sup> choice \_\_\_\_\_

2<sup>nd</sup> choice \_\_\_\_\_

3<sup>rd</sup> choice \_\_\_\_\_

Knowledge of language(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Financial Aid Status \_\_\_\_\_

Time period interested in study abroad \_\_\_\_\_

Did you have prior experience in study abroad /exchange and /or international volunteer programs \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain \_\_\_\_\_

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Briefly state the reasons why you wish to study abroad?

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What are your academic and career objectives for studying abroad?

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List specific objectives you realistically hope to accomplish while abroad and indicate how attainment of these objectives can contribute to your career plans?

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Please submit your completed form to:

Office of International Services  
Governors State University  
University Park, IL – 60466