



PROGRAM APPLICATION FORM FLORENCE, ITALY 2012

APPLICANT INFORMATION			
Name:			
Date of birth:	ASU ID:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Passport # ¹		Male	Female
PERMANENT ADDRESS UNTIL MAY 2012			
Permanent address:			
Phone:	E-mail:		
City:	State:	ZIP Code:	
CURRENT COLLEGE STATUS			
If a college student, name institution attending:			
College:	Current GPA:	Phone:	
Check one:	Freshman	Sophomore	Junior Senior Graduate student Other
If not currently an ASU student, have you previously attended ASU? Yes No If so, year:			
Two most recently completed Italian courses (if any).	1. Course number and title:		2. Course number and title:
	Grade:	Year:	Grade: Year:
COURSES YOU WISH TO ENROLL IN FOR SUMMER 2012 IN FLORENCE (MINIMUM 6, MAXIMUM 7 CREDITS)			
Course prefix/number:		Credit	Audit
Course prefix/number:		Credit	Audit
ADDITIONAL INFORMATION			
Do you have any health/physical difficulties that require special assistance?		Yes	No
Are you taking any medications that should be communicated to health care professionals in case of an emergency? If so list name and purpose (Example: Allegra – seasonal allergies)			
Please list medication, foods, or any other allergies you have:			
Are you on a special diet?	Diabetic	Vegetarian	Other
REFERENCES			
Academic:	Address:		Phone:
Personal:	Address:		Phone:
SIGNATURE			

¹ If not available at the time of filing application, please submit later.



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I certify that all information provided on this application is correct, and that I have read and understood all information about the Program posted on the website <http://asu.edu/florenceitaly>. I have read and have understood the payment and refund policy of the ASU Study Abroad Office, posted at <http://studyabroad.asu.edu/>. I am over 18 years of age and may travel legally without a parent or guardian.

Signature of student:

Date:

After completing this form, please print out and mail, or fax, to:

Professor Pier Raimondo Baldini
Director, ASU Florence Summer Program
Arizona State University
School of International Letters and Sciences
PO Box 870202
Tempe, AZ 85287-0202

Fax: (480) 965 0135

Or submit in person on the ASU Tempe Campus, Languages & Literatures Building Room 409.

OFFICE USE ONLY

Date Received:

Acceptance letter/message:

Date:

Notes: