

INSTRUCTIONS -- Submit **THREE COPIES** of all materials to:

**Prof. Thuan Vu, Southern Connecticut State University
Art Department, Earl Hall room 206 A
501 Crescent Street
New Haven, CT 06515**

Submit:

- **3 copies of the application, including Personal Profile.**
- **3 transcripts:**
 - If you are an SCSU student, 3 unofficial student copies are acceptable; in addition, if you have attended other colleges/ universities, for each submit one official transcript & 2 photocopies. Note that our Records Office cannot provide you with official transcripts from other institutions.
 - If you are not an SCSU student, 1 certified transcript & 2 photocopies from each college or university you have attended. Note that your current institution is not able to provide you with an official transcript from other schools.
- **Two confidential references, one from a professor on your home campus**
 - We do not accept references from friends or family. If you are not a student, please provide two references, one professional. These must be returned directly to Prof. Vu (at address above) . Your application will not be processed until these reference letters are received.



Applications are due February 15, 2008.

Notifications of acceptance will go out February 22, 2008.

Please observe all deadlines as described in the brochure.

Questions: Prof. Thuan Vu
Vut1@southernct.edu
203-392-669

SCSU Summer Program in Paris: APPLICATION

Full name: _____

Gender: ___M / ___F Date of birth: _____ Age: _____

Phone (permanent and cell) _____

Email address: _____

Current address: _____

Permanent address: _____

University where enrolled: _____

Student ID number: _____

Citizenship & Passport number: _____

[Passport number can be added later.]

Current class: ___Freshman ___Sophomore ___Junior ___Senior ___Graduate

GPA: _____ Major: _____ Minor: _____

Will you apply for financial aid? ___Yes / ___No

Have you ever lived, studied, or traveled in another country? ___Yes / ___No

If yes, please describe & include dates: _____

List in chronological order all institutions attended since high school; for each, give institution name, location, dates you attended, degrees or credits earned:

Each class needs a requisite number of students in order for it to travel to Paris. You may take either one or two classes. Number the classes you wish to take with 1 or 2 to indicate which class interests you the most.

___ART 225	Creative Drawing	Prof. Vu
___ART 398	City of Light: 2000 Years of Art and Architecture in Paris	Dr. Serchuk
___FRE 206/306/506	Advanced French Culture and Language Practice in France: French Cinema	Prof. Ehrmann

If you chose FRE 206, FRE 306, or FRE 506, please provide:

-- your current level & years of study of French: _____

-- your GPA in all courses of French: _____

-- a reference who can verify your ability level in French: _____

How did you hear about this program? _____

AGREEMENT: "I certify that the information submitted on this application is correct. I agree to be subject to the academic and financial policies of SCSU. I am in good academic and disciplinary standing at my home college/university and agree to notify SCSU if my status changes. I have read the SCSU Summer Program in Paris brochure, understand the policies therein, and realize that they are binding. I authorize SCSU to forward an official program transcript to an appropriate official at my home institution."

Signature: _____ Date: _____

PERSONAL PROFILE: Please state how this program suits your academic and personal goals. (At least 250 words, word-processed. Please do not write on the back of this page, and use additional pages if necessary.)

SCSU Summer Program in Paris – Confidential Recommendation Form

To the recommender: The student named below has given us your name as a person able to provide an evaluation of his/her qualifications for an academic study program abroad offered by International Programs at Southern Connecticut State University. Students are selected for this program on the basis of their academic ability, motivation, seriousness of purpose, and maturity. It is important to the student and the University that we select only those students who are most likely to succeed in and benefit from this program. We appreciate your candid opinion as to the applicant’s qualifications. As you will note below, the applicant has waived right of access to this reference.

The student’s application cannot be processed until references are returned. We would therefore appreciate receiving your response as soon as possible. Please do NOT give this form to the applicant, but return it directly to Prof. Thuan Vu, Southern Connecticut State University, Art Dept. Earl Hall room 206 A, 501 Crescent St., New Haven CT 06515.

To be completed by the applicant:

Name of applicant: _____

Home institution: _____

Courses to be taken in Paris _____

Name & title of reference: _____

All rights of access conferred by the Family Educational Rights and Privacy Act of 1974 (P.X. 93-380) as amended, or otherwise, to all information and materials of any kind received by Southern Connecticut State University from any source in connection with this application are hereby voluntarily waived.

Signature of applicant: _____ *Date:* _____

To be completed by the recommender:

1. How long and in what capacity have you known the applicant?

2. If selected, this student will be required to make an adjustment to a challenging living situation. The student’s success in the program will be strongly affected by this adjustment to living in a foreign environment. Based on your knowledge of the applicant, what is your opinion of the student’s ability to make such adjustments?

NOTE: If knowledge of French is required for the courses the student wishes to take & you have knowledge of the student's capabilities, please answer 3 & 4. If not, please move to 5.

3. Please indicate your judgment of the applicant's language abilities in French.

	Listening	Speaking	Reading	Writing
Advanced	_____	_____	_____	_____
Intermediate	_____	_____	_____	_____
Novice	_____	_____	_____	_____
N/A	_____	_____	_____	_____

4. What is your opinion of the applicant's ability to use French in Paris?

- _____ Should have no or little difficulty.
- _____ Should be able to manage adequately, perhaps after an initial adjustment.
- _____ Would require considerable instruction before competence achieved.
- _____ N/A

5. How would you describe the applicant in terms of her/his character?

6. All applicants have strengths & weaknesses relevant to study abroad. Please comment on those of this candidate.

7. Please check the statement that most accurately reflects your opinion of this student's suitability for the Paris Program:

- The student has my strong recommendation.
- I cannot recommend this student for the Program.
- I have minor reservations, but recommend the student noting these reservations:

Signature

Title

Institution

Telephone

Date

Address

City, State

Zip

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