## 1. Student Contact Information

Please make sure all your information is accurate. Your name must be your full legal name.

First Name	Middle Name		
Last Name	Preferred/Other Name (optional)		
Street Address	City		
Sta t e	Country		
Zip	Date of Birth (mm/dd/yyyy)		
Gender  Semale Male Non-Binary Prefer not to	Student Email disclose		
Phone Number			

2. Are a US citizen or green card	holder?
Yes	
No	
3. Country of citizenship, if not	US
6. Have you previously traveled	labroad?
When & where?	

## 7. Emergency Contact Information

First Name	Last Name	
Email	Phone Number	
Relationship to Applicant		
8. College/University Informati	on	
Name of School	School City	
School State	Major/Minor	
Expected Graduation Year  9 10 11 12		

9. How many semesters (or equivalent) of German will by next summer?	you have completed
Please note: Prior knowledge of German is recommended but not required for the	nis program.
10. Other languages spoken, and for how many years?	
11. What drew you to this particular program and what to accomplish by participating?	do you hope

unfamiliar environment.
Please be specific - In what ways were you challenged? How did you overcome these challenges associated with the new environment? What did you learn from this experience?
13. Describe your experience living and interacting with people from di erent backgrounds.
(such as: religion, gender, social, economic status, ethnicity, race, sexual orientation)

12. Please tell us about a time when you had to adapt to a new and

15. Would you like to I	oe considered fo	or a scholarship fo	r this program?
Yes			
No			
-	<u> </u>	- •	available to students need for a scholarship.
17. Please share any your application for the		ormation that is	relevant to