

# Summer Study Program Application

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## - Preview -

### 1 Student Contact Information

First Name

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Middle Name

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Last Name

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Preferred/Other Name (optional)

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Street Address

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City

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State

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Country

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Zip

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Date of Birth (mm/dd/yyyy)

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Gender

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Student Email

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Phone Number

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**2** Are a US citizen or green card holder?

**3** Country of citizenship, if not US

**4** I consent to AATG sharing information regarding my application with my parent or legal guardian.

**5** Parent/Guardian Information

Parent First Name

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Parent Last Name

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Parent Email

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Parent Phone Number

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**6** School Information

Name of School

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School City

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School State

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German Teacher First Name

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German Teacher Last Name

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German Teacher Email

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Years of German

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Current Grade

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- 7** I confirm that I am either vaccinated against measles or have acquired immunity against measles.
  
- 8** I will be no younger than 15 and no older than 17 for the entire duration of the program.
  
- 9** Have you previously traveled abroad?
  
- 10** Do you speak/have you studied any other languages (and for how long?)
  
- 11** Briefly describe why you would like to go to Germany this summer (in English)!
  
- 12** First day of summer availability (mm/dd)
  
- 13** Course Site & Date Ranking
  
- 14** I understand that additional documents will be required once my initial application is approved.
  
- 15** Do you plan to apply for a scholarship through AATG or any of these third-party organizations?

