



Application For NSE

Application Deadline

March 1st

For Fall, Spring and Academic Year

Date Application Submitted: _____

A COMPLETE APPLICATION IS REQUIRED BY MARCH 1ST

- this form completely filled out
- application fee (see bottom of page 4)
- reference form (attached)
- personal statement (attach a one page statement explaining why you want to participate in NSE)
- language proficiency report (required only for host institutions in Puerto Rico or Quebec / request this form from Global Education Office)

WE CANNOT CONSIDER LATE OR INCOMPLETE APPLICATIONS!!!

SUBMIT YOUR COMPLETE APPLICATION BY MARCH 1ST TO:

Global Education Office
102 Broad Street
Plattsburgh, New York 12901
Phone: 1-518-564-2321
Fax: 1-518-564-2326
E-mail: nse@plattsburgh.edu

Please type or print very clearly.

CONTACT INFORMATION

Name: First _____ Middle _____ Last _____

Current Address:

Street/Residence Hall and Room _____

City, State/Province, and Zip/Postal Code _____

Permanent Address:

Street _____

City, State/Province, and Zip/Postal Code _____

Current Phone ____/____ extension ____ Permanent Phone ____/____

Alternate Phone/Cell Phone ____/____

E-mail _____ Alternate E-mail _____

Social Security Number _____ Campus I.D. Number _____

DEMOGRAPHIC INFORMATION

Date of Birth (MM/DD/YYYY): _____

Gender: Female Male

Are you currently living in on-campus housing? Yes No

Are you a resident of the state/province in which your home campus is located? Yes No

Country of Citizenship: United States Canada Other _____

Non-resident alien — If non-resident alien, visa type _____ Lawful permanent resident

DEMOGRAPHIC INFORMATION, continued

Primary reason(s) for exchange - check all applicable

- access different courses/faculty
- evaluate graduate schools
- live in a different area
- personal growth
- participate in host campus international program
- enter host campus honors program
- exchange as a resident assistant
- language study
- look for future employment
- other: _____

SCHOLASTIC AND OTHER INFORMATION

Current Class Level: Fr So Jr Sr Cumulative grade point average: _____

Major: _____ Minor: _____

Will you need courses in your major while on exchange? Yes No

Are you requesting financial aid (Plan A) from the host campus? Yes No

Are you currently receiving financial aid? Yes No

Where do you plan to reside at the exchange school? Residence hall Sorority/Fraternity Off-campus

Are you currently enrolled in the honors program? Yes No

Marital Status: Single Married

Will you be accompanied on exchange by: spouse Yes No children Yes No

Do you wish to go on exchange with another student(s): Yes No

If yes, name of the student(s) _____

Name of campus at which the student is enrolled: _____

EXCHANGE REQUESTS

- Period of requested exchange: Fall Semester 20____ Spring Semester 20____
 Fall Quarter 20____ Winter Quarter 20____ Spring Quarter 20____
 Summer 20____

List in priority order the institutions you wish to attend and the tuition payment plan(s) you could use. (Use an additional sheet if more than five institutions are requested.)

Name of Institution

1. _____
2. _____
3. _____
4. _____
5. _____

Tuition Payment Plan

Plan A=You pay in-state/resident tuition/fees to your host campus. (SUNY College at Plattsburgh participates in Plan A only.)

EDUCATIONAL BACKGROUND

Number of credits completed to date: _____ Number of credits enrolled in current term: _____

Expected graduation date: _____

Do you have any incomplete grades, missing grades, or other deficiencies (e.g. failure to complete required proficiency tests)? Yes No

If yes, please explain: _____

Activities, positions, honors while in college: _____

SPECIAL NEEDS OR CIRCUMSTANCES

If you have a physical condition for which accessible, on-campus housing or classroom accommodation might be needed; a documented disability which may require academic accommodation (e.g., notetakers, taped texts); a medical condition which might require immediate attention during exchange; or a condition which might affect emotional or mental well-being during exchange, you are encouraged to identify your needs by attaching a separate page indicating the nature and extent of your circumstances and arrangements which are currently being made for you on this campus. Also indicate whether or not we may contact your requested host campuses at this time. NSE does not discriminate on the basis of special needs. Rather, your disclosure at this stage of the application process is invited in order to assist you in identifying a placement site which can provide reasonable accommodation of your needs. Following placement, it is your responsibility to consult the host campus coordinator and ADA officer to determine the deadlines by which you must submit written, current, and professionally documented information as required by your host campus.

OTHER CONSIDERATIONS

Have you ever been convicted of a felony? Yes No

Are you on probation, parole, or have any legal judgments pending against you either inside or outside campus?

Yes No If yes, please explain:

Are you currently under any campus disciplinary action for violation of codes of academic or student conduct?

Yes No If yes, please explain:

Do you have any outstanding indebtedness to the campus? Yes No

LANGUAGE PROFICIENCY

What is your native language? English French Spanish Other: _____

If you plan to exchange to a campus in Puerto Rico, you must be certified for proficiency in Spanish. If you plan to exchange to the Universite de Sherbrooke in Quebec, you must be certified for proficiency in French. If English is not your first language, for all other NSE locations you must demonstrate proficiency in English. Language proficiency must be determined prior to placement.

REFERENCE

List the faculty/staff member who is writing a reference for you.

name	department/office	phone	e-mail
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EMERGENCY CONTACT

Name _____ Relationship _____

Street _____

City, State/Province, and Zip/Postal Code _____

Phone _____ / _____ E-mail _____

RELEASE OF INFORMATION

The collection, retention, and dissemination of your records and information about you are subject to federal regulation under the Family Education Rights and Privacy Act of 1974. You are responsible for specifying the persons or agents who have access to your records. Therefore, it is necessary that we obtain your permission to request and release information pertinent to your exchange. Please read the following statements and sign below:

- I understand that it will be necessary for my campus to obtain certain information about my academic and non-academic record in order to: 1) ascertain my eligibility and suitability for an exchange through NSE, and 2) facilitate my exchange after it is arranged. I hereby grant permission to the NSE coordinator and/or designee to obtain information that is appropriate to my application and participation in the exchange including, but not limited to, letters of recommendation, permanent academic records and transcripts, conduct, fiscal records, medical records, all for the purposes of exchange placement and participation, continuation, or termination.

- I give permission to the NSE coordinator and/or designee to contact appropriate personnel in order to verify that I am under no disciplinary action for violation of codes of academic and student conduct and/or that I have no judicial cases pending which would invalidate my eligibility for exchange.
- I hereby release information contained in my application, letters of recommendation, transcripts, and other information required as part of the NSE application process to my home NSE Coordinator, designee, and those individuals/committees responsible for reviewing and approving my application for exchange participation.
- I hereby give permission for the information contained in my application to be submitted on NSE's restricted, Web-based placement site for the use of the home and host campuses and the NSE Central Office in placement and record-keeping processes.
- I hereby release information contained in my application, letters of recommendation, transcripts, and other information required as part of the NSE application process to the National Student Exchange Central Office and to the NSE host institution at which I am placed.

Signature _____ Date _____

SIGNATURE

I have read and fully understand:

- information on eligibility, policy, and procedures presented in the NSE Directory (pages 6-13)
- campus policies and procedures governing my exchange participation

I further understand that:

- participating in the National Student Exchange is a privilege and not a right
- submitting an application is not a guarantee of application acceptance or placement
- failure to maintain (prior to and during my exchange) all of the eligibility requirements of the program and those of my home and host campuses will result in the cancellation of my exchange.
- failure to pay all financial obligations to my home and host campuses will result in the cancellation of my exchange.

I also understand that until financial obligations are met, my home and host campuses will not release transcripts; and I will not be permitted to re-enroll at, or graduate from, my home campus.

If accepted for participation in the National Student Exchange, I agree to adhere to all the rules and regulations of both my home and host institutions. Failure to do so will result in the cancellation of my exchange.

I affirm that all information is complete, accurate, and true to the best of my knowledge. I acknowledge that I am signing freely, voluntarily, and under no compulsion.

Signature _____ Date _____

APPLICATION FEE

Your Application Fee of \$120 must be included with your application. Please note that this fee is non-refundable and does not guarantee placement. If for some reason you are not accepted at any of the institutions you choose, then we will contact you for other choices.

____ I have attached a check or money order for \$120 made payable to Plattsburgh Study Abroad & Exchanges

____ I will be paying the \$120 Application Fee with the credit card information below.

Visa MasterCard Discover

Credit Card #: _____ Expiration Date: _____

Amount: \$120.00 Signature: _____

Academic Reference Form

SUNY PLATTSBURGH NATIONAL STUDENT EXCHANGE APPLICATION

STUDENT'S NAME _____

Instructions: Submit two academic references using this form. You should give these forms to two professors who know you well and are able to judge your academic qualifications for participation in National Student Exchange. These letters are confidential and should be submitted so. You may submit these forms with your application IF they are in a sealed and signed envelope by the person writing the reference. Or, your reference provider can send them directly to the NSE Coordinator at the address given below. You must provide this person with a stamped, addressed envelope for this purpose.

**NSE Coordinator
Study Abroad & Exchanges, SUNY Plattsburgh
101 Broad Street
Plattsburgh, NY 12901**

To the Student:

I waive my right to access this reference completed by _____ Yes No
Name of Reference

Student's Signature: _____ Date: _____

To the Reference

The student named above is applying to participate in National Student Exchange. We would appreciate your assessment of the applicant's attributes with which you are familiar.

How long and in what capacity have you known the student? __

Academic attributes

	Excellent	Very Good	Good	Fair	Poor	No Evaluation
Competence in major or specialization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic interest and motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacity for independent study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resourcefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Non-academic attributes

	Excellent	Very Good	Good	Fair	Poor	No Evaluation
Level of maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence and self-esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to relate well to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open-mindedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

On the reverse side of this page, please state frankly your opinion of this candidate's chances for success (both academic and non-academic) in National Student Exchange, weighing both strong and weak points.

Your name (please print): _____ Title/Dept. _____

Signature: _____ Date: _____