



STUDY ABROAD / NATIONAL EXCHANGE

APPLICATION

International Student Resource center & Study Abroad Russell Hall 227

SECTION 1

Application for:

NSU Exchange. Partner University: _____

National Student Exchange

ISEP

Starting Exchange: Fall 20____ Spring 20____ Summer _____

Duration of Exchange: 1 Semester 2 semesters

SECTION 2

Name: _____ NSU ID: _____
First Middle Last Name

Date of Birth: _____ Gender: Female Male Other
mm/dd/yyyy

NSU e-mail address: _____

Name of academic Advisor: _____ Academic Major: _____

Overall GPA: _____

Classification: Sophomore Junior Senior Graduate

SECTION 3

When turning in this application form, you must include a **brief statement** on why you want to study abroad and **one letter of recommendation** from a professor who knows you well in a classroom setting.

Your Academic advisor and Academic Department Head must approve this request.

Academic Advisor Signature

Date:

Student Signature

Date:

Academic Department Head Signature

Date: