

# application for admission

Mail completed application to:

**HECUA**

**2233 University Ave. W. - Suite 210 - St. Paul, MN 55114**

**P: 651-646-8832 or 800-554-1089 - F: 651-659-9421 - E: info@hecua.org**

## OFFICE USE ONLY

\_\_\_\_\_ Application Fee Enclosed

\_\_\_\_\_ Date Received

## BASIC INFORMATION

Name: \_\_\_\_\_

College/University: \_\_\_\_\_

Name of Program applying to: \_\_\_\_\_

Program term: ☐ Fall 20 \_\_\_\_\_ ☐ January 20 \_\_\_\_\_ ☐ Spring 20 \_\_\_\_\_ ☐ Summer 20 \_\_\_\_\_

## ACADEMIC INFORMATION

Current GPA: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Expected Graduation: (mm/yy) \_\_\_\_\_

## ADDITIONAL INFORMATION

Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_

Gender: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Racial/ethnic identity (optional): \_\_\_\_\_

How did you first hear about the program?

- ☐ The Off-Campus Study Office  
☐ My Professor/Advisor (name) \_\_\_\_\_  
☐ Class Presentation/Info Session/Fair (name) \_\_\_\_\_  
☐ Friend/Alum of Program (name) \_\_\_\_\_  
☐ Internet Source (specify) \_\_\_\_\_  
☐ Other (specify) \_\_\_\_\_  
☐ Advertising (specify) \_\_\_\_\_

## CURRENT CONTACT INFORMATION

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Last date to use current contact information: \_\_\_\_\_

## PERMANENT CONTACT INFORMATION

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Last date to use current contact information: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

Name(s) \_\_\_\_\_

Name(s) \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone (Day/Evening): \_\_\_\_\_

Phone (Day/Evening): \_\_\_\_\_

### PLEASE NOTE:

Please submit references and transcripts along with the application, if possible. These must be received before your application is approved.

DO NOT WRITE ESSAY ANSWERS ON THIS PAGE.

Please respond to the following essay questions on a separate sheet of paper. All responses must be typed and at least one page in length (two, if double-spaced). All applicants must answer the questions in Section A, additional sections are program-specific. Please review each section to determine what is required for your application.

## SECTION A. ESSAY QUESTIONS REQUIRED FOR ALL PROGRAMS:

1. Why are you interested in this program?
2. What past studies and experiences have prepared you for the program?
3. How do you predict that this program will affect you? What expectations or concerns do you have?

## SECTION B. FOR STUDENTS APPLYING TO SEMESTER PROGRAMS:

*Students interested in a paid summer internship – do not use this form. More information on page 23.*

*Please respond to the following essay questions:*

1. What kind of work would you like to do in the internship? Why?
2. What knowledge, skills and experience would you bring that could be useful in an internship?
3. What knowledge and skills would you like to develop in the internship?
4. What kind of work setting would you like for your internship?
5. How do you see this internship fulfilling your personal and professional goals?
6. What other hopes or concerns do you have about an internship?

## SECTION C. FOR STUDENTS APPLYING TO EITHER PROGRAM IN SCANDINAVIA:

*Please respond to the following essay questions:*

1. Do you plan to study the Norwegian language on the program? (The alternative is an independent study project.)
2. Have you previously studied Norwegian? At what level?
3. Please describe your background in the language (formal and informal learning).

## SECTION D. FOR STUDENTS APPLYING TO EITHER PROGRAM IN ECUADOR:

*Please respond to the following essay questions:*

1. What formal and informal instruction have you had in the Spanish language? Please specify levels and course titles or if Spanish is your first language.
2. What other contacts/experiences/involvement have you had with the Spanish language? (e.g. volunteer work)
3. What additional Spanish instruction or experience will you have prior to participation in the program?
4. How would you assess your Spanish language level? Use the following terms for each category; "very easy," "quite easy," "somewhat difficult," or "mostly difficult."

Reading:

Comprehension of Lectures:

Conversation (speaking):

Conversation (listening):

Writing:

**SIGNATURES MUST BE RECEIVED TO PROCESS APPLICATION.**  
**An application is deemed incomplete unless all signatures are included.**

**ACADEMIC REFERENCE**

The individual that acts as a reference must be an instructor.

Name:	Title:
College/University:	Department:
Street Address:	
City/State/Zip:	
Phone:	E-Mail:

**SIGNATURES/APPROVALS**

The following people must be informed of your plans and indicate their approval by signing here.

<b>Faculty Advisor:</b> Printed Name:	College/Department:
Signature:	Date:
Mailing Address:	
<input type="checkbox"/> This application is being submitted with my approval. <input type="checkbox"/> Credits have been approved to meet academic requirements (see below). <input type="checkbox"/> I would like more information about HECUA. Comments:	

Indicate how credit from each course of the program will be used (i.e. toward major, required course, general elective, other/specify):

**HECUA COURSE TITLE:**

**USE OF CREDIT:**



<b>Off-Campus Study Advisor:</b> Printed Name:	College/Department:
Signature:	Date:
Mailing Address:	
<input type="checkbox"/> This application is being submitted with my approval. <input type="checkbox"/> I would like more information about HECUA. Comments:	

<b>HECUA Campus Representative:</b> (For member schools only, see list on page 4). Printed Name:	College/Department:
Signature:	Date:
Mailing Address:	
Check all that apply: <input type="checkbox"/> I have discussed the HECUA program with the applicant. <input type="checkbox"/> I have reviewed this application for admission. <input type="checkbox"/> I have communicated to HECUA that this completed application is ready for review. <input type="checkbox"/> I recommend that HECUA contact me about this application. <input type="checkbox"/> Other (specify): Comments:	

WHAT IS YOUR HECUA CONNECTION?

1. We'd like to know the names of HECUA alumni or other individuals instrumental in your decision to apply. *Thanks!*

2. Have you participated previously in a HECUA program? Which one? When?

STUDENT

Printed Name

Signature:

Date:

Check when complete:

YES

N/A

- ☐ ☐ I have enclosed the application fee.
- ☐ ☐ I have completed essay sections A and B of the application because I am applying for a semester program.
- ☐ ☐ I am applying to a program in Ecuador and have enclosed the additional essay
- ☐ ☐ I am applying to a Scandinavia program and have enclosed the additional essay.
- ☐ ☐ I have requested my college send an official transcript to HECUA.
- ☐ ☐ I have requested an academic reference using the HECUA form.

I intend to apply for a HECUA Scholarship ☐ YES ☐ NO

Questions for the HECUA staff?