



**SUMMER STUDY IN FRANCE PROGRAM  
DEPARTMENT OF FOREIGN LANGUAGES & LITERATURES  
APPLICATION FOR PROGRAM ADMISSION: 2010**

**Step 1:** By December 7, you need to turn in your application (see below) in an envelope to Dr. Médoune Guèye (321 Major Williams). If you are accepted to the program, the FLL office will then establish an account at the Bursar for you. You will receive an email from the Bursar office letting you know that you have to pay the deposit of \$2,000. The money has to be paid by **January 4** at the latest.

**Step 2:** Once your account has been billed, fill out a T-pay form and have it accompany your down payment of \$2,000. The check will need to be made out to the **Treasurer of Virginia Tech**. You can also pay online. If you pay online, make sure to call the Bursar office to let them know that the money you have deposited is for a **Departmental Study Abroad Application Deposit (Detail Code P043)**.

The second deposit (\$4,000), due on **April 7**, needs to be accompanied by the T-pay form as well. Ensure that your banner account has posted that fee before paying.

Office of the University Bursar, 150 Student Services Building, Blacksburg, VA, 24061  
Phone: 540-231-6277 Email: bursar@vt.edu Fax: 540-231-3238

**PLEASE WRITE VERY CLEARLY**

NAME: (last, first, middle)

\_\_\_\_\_

*Please include full names, as they appear/will appear on your passport.*

Student Number: \_\_\_\_\_

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

Passport Number: \_\_\_\_\_

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

Gender (check one): \_\_\_\_\_ female \_\_\_\_\_ male

E-mail Address: \_\_\_\_\_

Projected year of graduation: \_\_\_\_\_

Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

College: \_\_\_\_\_ (e.g., CLAHS, Pamplin, etc.)

Grade Point Average: \_\_\_\_\_

Local Mailing Address and phone:

\_\_\_\_\_

\_\_\_\_\_

(City) \_\_\_\_\_ ( State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Phone: \_\_\_\_\_

Name, address, and phone of parent(s) and legal guardian(s)

*parent/guardian 1:*

\_\_\_\_\_

\_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

*parent/guardian 2 (if applicable):*

\_\_\_\_\_

\_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Person to contact in case of an emergency (put *same* if parents or legal guardians above):

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

(Address) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (zip) \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Will you be applying for financial aid? \_\_\_\_\_ yes \_\_\_\_\_ no

*(Note: Those interested in applying for financial aid MUST complete additional paperwork, and should do so as early as possible. Please contact the Office of International Research, Education & Development for information.)*

Are you currently enrolled as a student at Virginia Tech? \_\_\_\_\_ yes \_\_\_\_\_ no

*(Note for non-VPI&SU students: If you are not already a student at VT, you must also apply for admission to the university for special student status. There is a simple online form especially for visiting summer students, available through university admissions.) Office of International Research, Education & Development*

*List the French classes you have taken:*

*Indicate your involvement/participation in extracurricular French activities (e.g., Le Cercle Francophone, Frenchship).*

*For which courses would you like to receive credit in France? (Choose from the list of courses on the announcement).*

*Do you have any knowledge of French not acquired in the classroom? If so, please explain.*

*Have you had any previous significant (longer than just a few days) travel outside the USA? When, where, and for how long?*

*Is there any other special information (smoker/non-smoker, medication, etc.), which you would like us to take into consideration?*

*Will you be flying to Paris with the group, or will you arrive separately?*

*If you are flying to Paris with the group, would you like to take advantage of the independent travel time (at possible additional expense) before or after the Program?*

*If you do plan to stay in France for independent travel, how long do you intend to stay and on what date would you like to leave/return?*

*If you are flying to Paris with the group, how do you plan to get to Washington, DC from your home and back again?*

*Additional special requests and arrangements, including dietary restrictions. If you are vegetarian, indicate what you do **not** eat. How strict are you?*

***Please sign and return this form contingent upon the following statement:***

*I have no communicable disease, physical condition, mental condition, or recurring ailment which is likely to require medical, surgical, or psychiatric attention during the time of the Virginia Polytechnic Institute & State University Summer Study Program in France or prevent or limit my efficiency in matters of studies and normal recreation, be detrimental to the welfare of the group of other students in the Program, or require unreasonable attention of the group's directors, teachers, or of the host family or residence where I will be lodged.*

*Date:* \_\_\_\_\_

*Signed:* \_\_\_\_\_

Mail or bring completed form to:

Dr. Médoune Guèye  
Department of Foreign Languages and Literatures  
321 Major Williams Hall  
Virginia Polytechnic Institute & State University  
Blacksburg, VA 24061-0225