FALL 2012 (UL)& SPRING 2013 SEMESTER (UWIC & UL)



KINESIOLOGY DEPARTMENT CALIFORNIA STATE UNIVERSITY, LONG BEACH INTERNATIONAL STUDENT EXCHANGE PROGRAM APPLICATION FORM

As of Spring 2012 the Kinesiology Department at CSULB will be able to directly exchange students with two universities in Europe. The University of Wales, Institute Cardiff (UWIC) has been an exchange program partner for over 25 years and continues to provide opportunities for a number of CSULB Kinesiology majors to study in Cardiff, Wales. This exchange program is predominantly a spring semester program. The University of Limerick (UL) exchange program is **new** and provides the opportunity for a <u>couple</u> of students from the CSULB Kinesiology Department to study in Limerick, Ireland. It is intended that 2 CSULB students will participate in this exchange every semester. Due to the schedule of classes offered at the UWIC or University of Limerick, you should consult with Dr. Williams to ascertain the feasibility of taking required coursework at either institution.

CHECKLIST & INSTRUCTION FOR EXCHANGE APPLICATION CANDIDATES

An official transcript is required from each college or university you have attended (including summer sessions) outside of CSULB. Please include your transcripts from other institutions with this application. For CSULB, the myCSULB printed transcripts are sufficient.

☐ The Application Deadline (Tuesday before Thanksgiving for UL Fall and last Thursday in March for UWIC/UL Spring semesters)

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Please indicate your application choice/s. If you have a preference, please indicate by identifying your first choice, 2nd choice etc.,

	Applying for l			
	Applying for l	•		
	Applying for 1	UL (SP)		
		both UWIC	and UL (SP or FA)
CSUL 1250 Long CA 90	iology Department B Bellflower Boulevard Beach 0840-4901 e: (562) 985-7344			
Nam	e:			
- 100	Last	First	Middle initial	
Phon	DENT ID # (P.I.N.): ne : il:			
Loca	1/Campus Address			
	et:			
City:			ZIP:	
Phon	ıe:		_	
Hom	e/Parents' Address			
Pare	nt's Name/s:			
Relat	tionship:			
Stree	et:		ZIP:	
Oity: Phon	ne:			
			_	

FALL 2012 (UL)& SPRING 2013 SEMESTER (UWIC & UL) Country of Citizenship: 1. Resident Status: Resident, Nonresident, Foreign Student 2. 3. Marital Status: ☐ Single, ☐ Married, ☐ Divorced, ☐ Separated, 4. Current major field of study:_____ 5. 6. GPA: Cumulative GPA:______, Last Semester GPA:_____ 7. Expected Date of graduation:_____ 8. Units completed by September 201_; Class level: ☐ Freshman, ☐ Sophomore, ☐ Junior, ☐ Senior, ☐ Graduate 9. 10. **Educational Experience** Name Degree or Major Dates Location Certificate Attended Secondary School College Other List below academic honors, extra-curricular activities, offices held, and 11. interests: 12. How did you learn about the exchange program? What made you decide to apply for the exchange program? 13.

FALL 2012 (UL)& SPRING 2013 SEMESTER (UWIC & UL) Experience working in education related activities

14.

Employer	Working Dates	Description of Duties	
	ment experience mmer, part-time, and	d military service):	
Employer	Working Dates	Description of Duties	
16. Career Plans:			
-	y talents, abilities, sp	pecial interests and/or athletic	
		road, please list the countries visited,	

FALL 2012 (UL)& SPRING 2013 SEMESTER (UWIC & UL) List any serious illnesses or periods of hospitalization during the past

19.	three years. Indicate any history of chronic physical ailments and of psychological problems. If special medical care is required, state the				
nature of that care. Continue on a separate sheet if necessary: (Do you have any allergies (hayfever, asthma, and certain types of medication)					
20.	List any languages that you speak, read, or write, and level of fluency:				
21.	I intend to finance my semester abroad in the following manner				
Estir	nated cost \$:				
Perso	onal Savings \$:				
Pare	ntal Support \$:				
(Note	er (Scholarships, loans, financial aid, etc.,)e: Due to currency fluctuations estimated costs may be higher or lower presented at orientation meeting).				
22.	References: List the names, addresses, and phone number of two references, one of which should be a CSULB faculty member. (CSULB KPE faculty do not need to write a reference, they can contact Dr. Williams directly. CSULB faculty can e-mail or call Dr. Williams (5-7344) with their reference. References outside of CSULB must be written.				
	e:, Address:				
Phon	ne:				
	e:, Address: ne:				
that Kine	tify that the information given on this application is correct, and I agree if accepted, I shall abide by all rules, regulations, and requirements of the siology and Physical Education Department's International Student ange Program.				
Signa	ature Date				
Type	or Print Name				

2012 APPLICATIONS for FALL 2012 (UL)& SPRING 2013 SEMESTER (UWIC & UL)



Reference Form:

KINESIOLOGY DEPARTMENT CALIFORNIA STATE UNIVERSITY, LONG BEACH INTERNATIONAL STUDENT EXCHANGE PROGRAM

Student's Name:
Name:
Phone:
Address:
In writing a reference please indicate how long have you known the student? Additionally, why do you think the student would be a suitable candidate for the International Exchange? Please take into consideration that students in Europe are required to work independently. Additionally, course grades are based in large part on course projects and final comprehensive exams. Students are expected to be able to synthesize research and be able to demonstrate their subject matter knowledge based upon 3+ hour essay type final examinations. You can use this form or complete the reference on your own letterhead.

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