



University of Georgia
Department of Financial Planning, Housing and Consumer Economics
Washington D.C.
Study Tour Application

FHCE 5710/7710 – 3 credit hours;

First Short Session 2018 (In D.C. June 17th – June 22nd)

Program fee: \$1,580 (Program fee covers lodging, several meals, attractions and special events. As a requirement for the course, every student must purchase a plane ticket in order to participate in the study tour—student will arrange his/her flight to and from Washington D.C.).

Checklist

Instructions:

- Return complete application by **February 16th** to:
 Dr. Diann Moorman: 205 Dawson Hall (dmoorman@uga.edu)
 Office of Housing and Consumer Economics,
- Submit all of the following materials together (except references, see below)
- Only complete applications will be considered.

Make sure the following items are included in the materials you return:

- All pages of the completed and signed application (including this one).
- 1 copy of your UGA Degree Audit Report
- Deposit of \$500 will be charged to your student account. **DEPOSIT IS DUE FEBRUARY 28TH**. This deposit is **refundable** if you are not accepted into the program. Students who withdraw from the program may have this fee refunded until March 25, 2018.
- Balance of \$750 is due March 25, 2018

I understand that submitting an application for the Washington D.C. Study Tour does not guarantee acceptance into the program. Candidates must meet program requirements and be approved by the program's faculty coordinator(s). Participation is also subject to availability.

I further understand that the program or individual courses may be cancelled due to low enrollment or other factors and I understand that I will be informed of such a decision no later than 6 weeks before planned departure date or as soon as possible after any adverse circumstances that cause the program to be cancelled.

Student Name _____ Signature _____ Date _____

For Student Services Office Use Only:	
Date Received _____	Deposit Received _____
Check Number _____	Missing Items _____
Decision _____	_____



University of Georgia Washington D.C. Study Tour Application

Personal and Academic Information (Please print or type)

Full Name _____

Preferred Name _____

Social Security Number _____

Birth Date _____ Age _____ Sex: _____ M _____ F

Emergency Contact Information: - _____

Are you receiving financial aid (including HOPE) ___ Yes ___ No

What types? _____

Your college/univ. _____

Are you a Georgia Resident? ___ Yes ___ No GPA _____ GPA in major _____

Major(s) _____

Minor(s) _____

Academic Level_1st year_2nd year_3rd year_4th year Master's_Ph.D.
(during study tour)

Campus Address _____

_____ Phone_ E-mail _____

Permanent Address _____

_____ Phone _____

Citizenship _____ Passport Number _____

Date of Issuance _____ Passport Agency _____ Date of Expiration _____

Please list all colleges or universities previously attended:

Name _____ Dates: From _____ to _____

Degree(s) awarded _____ Major _____

Name _____ Dates: From _____ to _____

Degree(s) awarded _____ Major _____

Name _____ Dates: From _____ to _____

Degree(s) awarded _____ Major _____



Personal Activities

Are you currently employed? yes no Occupation _____

If applicable, give name, address, and phone number of employer _____

List the primary co-curricular activities in which you are involved and in what capacity _____

Disciplinary and Criminal Record

Are you currently, or have you ever been, charged with, or subject to, disciplinary action for scholastic or any other type of misconduct at any educational institution?

yes no If yes, please explain _____

Have you been convicted of a crime other than a minor traffic offense, or are any criminal charges now pending against you? yes no

If yes, please explain _____

Convictions shall include: A finding of guilty by a judge or jury, a plea of guilty, or a plea of nolo contendere, irrespective of the pendency or availability of any appeal or application for collateral relief. If "Yes", explain fully, specifying the nature of the offense(s), the date(s) it/they occurred, the name and location of the court(s) and sentence(s) imposed. Please submit court documentation if appropriate.

Essay

On a separate page, please type or word process an essay expressing why you want to study in Washington D.C. Please explain what about our nation's capital interests you most, and why the characteristics of this particular program support your personal, academic, and career goals.



Release and Application Signature

I hereby authorize officials at any educational institution that I have attended to release my disciplinary records (including but not limited to records maintained by the Judicial Programs and Services Office, the Registrar, the Department of Housing, and/or the Office of the Vice President for Academic Affairs) to the study program director of the program to which I am applying. I fully understand that my disciplinary records may be a factor in evaluating my application.

I further acknowledge that the information provided on this application is true and accurate to the best of my knowledge. I fully understand that providing false information during the application process may be grounds for rejecting my application or grounds for dismissal from the study program.

Student Signature

Date

Applicants who are accepted to participate in a UGA study tour program are required by the University of Georgia to complete and sign a student agreement and waiver which stipulates the terms and conditions of the program, student conduct regulations and a waiver of liability.

References

According to the Family Educational Rights and Privacy Act of 1974, you may decide whether letters of reference written on your behalf are to be kept confidential or available for your inspection. Please choose below and indicate your choice on the reference forms.

Confidential file Open file

Please obtain two references using the following forms and either include them in your file, or have them sent directly to the study program office (205 Dawson). References from faculty or employers are preferred. References from friends, family, or neighbors are not acceptable.



Reference Form for Washington D.C. Study Tour 2018

Please return to: Dr. Diann Moorman (dmoorman@uga.edu)

205 Dawson Hall

Housing and Consumer Economics Department

By February 12, 2018 (electronic version from letter writer is acceptable)

I. This section is to be completed by the student applicant (please print or type):

Applicant's Name _____

Applicant's local telephone _____ E-mail _____

This reference is _____ confidential _____ not confidential

II. This section to be completed by the referee

Name and title of referee _____

Phone _____ E-mail _____

1. How long have you known the applicant and in what capacity?

2. Is there any reason why you would not recommend that the applicant participate in the Washington D.C. Study Tour program?

Please indicate your perceptions of the applicant's competence in the following areas:

Area	Below Average	Average	Above Average	Outstanding	Inadequate Opportunity To Observe
Intellectual					
Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional					
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stress Tolerance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to interact					
with others	<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"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-motivation/					
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other remarks may be written or typed on the back of this form or on a separate sheet.

Signature of Referee _____ Date _____

Please indicate your perceptions of the applicant's competence in the following areas:

Area	Below Average	Average	Above Average	Outstanding	Inadequate Opportunity To Observe
Intellectual					
Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional					
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stress Tolerance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to interact with others	<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"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-motivation/ Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other remarks may be written or typed on the back of this form or on a separate sheet.

Signature of Referee _____ Date _____