TRINITY CHRISTIAN COLLEGE

SEND TO:
Off Campus Programs
Trinity Christian College
6601 West College Drive
Palos Heights, IL 60463

# SEMESTER IN NICARAGUA

## Application for Admission

**PERSONAL INFORMATION:**

LAST NAME FIRST NAME MIDDLE INITIAL

BIRTH DATE SOCIAL SECURITY NUMBER GENDER ☐ MALE ☐ FEMALE

**CURRENT ADDRESS:** ADDRESS VALID UNITL (DATE) _____

STREET ADDRESS

CITY STATE/PROVINCE ZIP/POSTAL CODE COUNTRY

DAYTIME PHONE EVENING PHONE CELL PHONE

EMAIL ADDRESS

**PERMANENT ADDRESS (IF DIFFERENT FROM ABOVE):**

STREET ADRESS

CITY STATE/PROVINCE ZIP/POSTAL CODE COUNTRY

DAYTIME PHONE EVENING PHONE CELL PHONE

EMAIL ADDRESS

**PARENT OR GUARDIAN INFORMATION (PLEASE PROVIDE THIS IF YOU ARE UNDER 25 YEARS OLD):**

NAME(S)

HOME ADDRESS (IF DIFFERENT THAN ABOVE)

CITY STATE/PROVINCE ZIP/POSTAL CODE COUNTRY

DAYTIME PHONE EVENING PHONE CELL PHONE

EMAIL ADDRESS

**EDUCATION:**

NAME OF COLLEGE YOU CURRENTLY ATTEND (CITY/STATE) DATES ENROLLED FROM/TO

CURRENT GRADE LEVEL CUMMULATIVE GPA

PREVIOUS SPANISH HIGH SCHOOL (YEARS): 1 2 3 4 COLLEGE (SEMESTERS): 1 2 3 4

MAJOR MINOR ANTICIPATED GRADUATION DATE

**NAMES OF OTHER COLLEGES OR UNIVERSITIES YOU ATTENDED:**

NAME DATES ENROLLED FROM/TO

NAME DATES ENROLLED FROM/TO

**ADDITIONAL INFORMATION:** PLEASE ATTACH A PERSONAL STATEMENT THAT DESCRIBES YOUR INTEREST IN ATTENDING THE PROGRAM. INDICATE ANY PREVIOUS INTERNATIONAL TRAVEL OR STUDY EXPERIENCE.

**HOW DID YOU HEAR ABOUT THE SEMESTER IN NICARAGUA PROGRAM?** _____

**REFERENCES:** PLEASE PROVIDE **TWO** LETTERS OF REFERENCE WITH THE APPLICATION.

**REFERENCE LETTER NO. 1 –** SHOULD BE YOUR PROFESSOR:

NAME (AREA CODE) PHONE #

STREET ADDRESS CITY STATE/PROVINCE ZIP/POSTAL CODE

WHAT IS THIS PERSON'S RELATIONSHIP TO YOU?

**REFERENCE LETTER NO. 2** – MAY BE A PROFESSOR, SCHOOL OFFICIAL, COACH, PASTOR, OR ADVISOR:

NAME (AREA CODE) PHONE #

STREET ADDRESS CITY STATE/PROVINCE ZIP/POSTAL CODE

WHAT IS THIS PERSON'S RELATIONSHIP TO YOU?

I CERTIFY THAT I PERSONALLY HAVE COMPLETED THIS APPLICATION AND THAT THE INFORMATION I AM PROVIDING IS COMPLETE, ACCURATE, AND GIVEN IN GOOD FAITH.

SIGNATURE DATE