UW DIVISION OF SPANISH & PORTUGUESE STUDIES
SPRING QUARTER ______ IN LEÓN, SPAIN

Fill in Year

Please return your completed application form and accompanying materials to Lani Phillips in C-106 Padelford Hall, or drop it off in her box in the Spanish and Portuguese Main Office (C-104 Padelford Hall).

NAME: ____ DATE: ____________
Last First Middle

STUDENT #: _____________ BIRTHDATE: ___________________ CITIZENSHIP: ____________

LOCAL MAILING ADDRESS (good until: _________) *PERMANENT* MAILING ADDRESS

________________________________ ________________________________
Street, Apt. # (box number, if on campus) Street, Apt. #

________________________________ ________________________________
City State Zip City State Zip

PHONE: ___________________________ PHONE: ___________________________

EMAIL: ___________________________ EMAIL: ___________________________

May we include your name and local address and email address on a list to be given to other participants? ______
IT IS IMPERATIVE THAT YOU NOTIFY THE SPANISH ADVISING OFFICE OF ANY CHANGES IN ADDRESS SO THAT YOU WILL RECEIVE NECESSARY INFORMATION PROMPTLY.

MOTHER OR LEGAL GUARDIAN'S ADDRESS: ____

____ PHONE:________________________

FATHER OR LEGAL GUARDIAN'S ADDRESS: ____

____ PHONE: ________________________

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TOTAL # OF COLLEGE CREDITS : ____________ MAJOR: ____________________

TRANSFER CREDITS: ________ UW CREDITS: ________ GPA: _________

SPANISH COURSES TAKEN AT UW:

Course number/Title	*Qtr/Year*	*Instructor Name*	*Grade*

-Along with this application, please submit an unofficial UW transcript, and a 1-1.5 page, double-spaced, typed essay in English explaining why you want to participate in this program. Please discuss any previous experience you have had living or traveling abroad and other evidence of your maturity, flexibility, and adaptability to new situations.

- List the name and departmental affiliation of one instructor from the UW whom you have asked to write a letter of recommendation on your behalf (please see attached letter of recommendation form). If necessary, letters may be sent via email to Lani Phillips at spanport@u.washington.edu.

Recommender's name/Title *Departmental Affiliation*

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If additional information is required, you may be invited for a personal interview.

NOTE: Participants will be asked to fill out a home stay information form and have a doctor fill out a medical information form. These forms and other information will be provided to all participants once enrollment in the program has closed.