# Lamar University General Application Form

## Lamar University ID #: Date of Birth: Gender: Male Female

Name (Exactly as appears on your passport): Passport Number: Passport Nationality:

Current Street Address: City: State: Zip Code:

E-mail Address: Home Phone Number: Work Phone Number: Cell Phone Number:

Permanent Street Address: City: State: Zip Code:

Parents/Next of Kin Street Address: City: State: Zip Code:

E-mail Address: Home Phone Number: Work Phone Number: Cell Phone Number:

### Complete each question by circling the correct answer:

1. Current classification:
   - [ ] Freshman
   - [ ] Sophomore
   - [ ] Junior
   - [ ] Senior
   - [ ] Graduate
   - [ ] Post Graduate

2. Taking this course for:
   - [ ] Undergraduate Credit
   - [ ] Graduate Credit
   - Expected Graduation Date: __________

3. College:
   - [ ] Arts & Sciences
   - [ ] Education & Human Development
   - [ ] Other: __________________________
   - [ ] Business
   - [ ] Fine Arts & Communication
   - [ ] Engineering
   - [ ] Graduate

4. Major:

5. Are you planning to graduate before your study abroad program starts? Yes [  ] No [  ]

   If you graduate before your study abroad course begins, your enrollment in the course will be canceled. To participate post-graduation, you must be accepted as a graduate or post-graduate student at Lamar University before the study abroad program starts.

6. Study Abroad Program Information
   - [ ] Lamar University Faculty-led Program
     - Program Director: __________________________
     - Course Number(s): __________________________
   - [ ] Lamar University Exchange Program
     - Host University: __________________________
     - Course Number(s): __________________________
   - [ ] Transient Study Abroad
     - Country: __________________________
     - University: __________________________
     - Program Name: __________________________
     - Website: __________________________
     - Contact Email address: __________________________

8. Do you require special accommodations due to disability-based reasons? Yes [  ] No [  ]

   If yes, attach a brief description of accommodations needed.

Student Signature: Date: