# Study Abroad India 2013 Program Application

**Last Name**: **\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**First Name**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Middle Initial**: \_\_\_\_\_

**PeopleSoft ID**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date of Birth**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Gender**: M or F

**Telephone number** (daytime) :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (evening) :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (other):\_\_\_\_\_\_\_\_\_\_\_  
**Email address(es)**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you receiving emails from the Listserv**? Y or N (If not, please email Frank Kelley at Fwkelley@uh.edu)

**Current Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City, State, Zip code**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Permanent Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City, State, Zip code**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Race or ethnic origin (optional, for statistical purposes only) check one**:

Latino/Mexican American\_\_\_\_ Black/Non-Hispanic\_\_\_\_\_ Spanish American\_\_\_\_

American Indian/ Alaskan Native\_\_\_\_ Asian/Pacific Islander\_\_\_\_\_\_ White\_\_\_\_\_\_

**Country of Citizenship**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Texas Residency Status:** Resident\_\_\_\_\_\_ Non-Resident\_\_\_\_\_\_\_

**Full name as it appears on your passport**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country that issued passport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Issue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Expiry: \_\_\_\_\_\_\_\_\_\_\_\_\_

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**For roommate assignment purposes**:  
 **Gender**: Male Female **Smoker**: Yes or No

**Name of preferred roommate** (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency contact person**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Relationship to you**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone number**(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email address (if available)**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Major Field of Study**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Minor Field of Study**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Overall UH GPA**\_\_\_\_\_\_\_\_**UH Semester hours completed at the end of the current semester**\_\_\_\_\_\_

**Current UH Classification**: Freshman\_\_\_\_ Sophomore \_\_\_ Junior\_\_\_ Senior\_\_\_\_\_\_

Graduate\_\_\_\_\_ Faculty\_\_\_ Staff\_\_\_\_\_ other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Anticipated date of Graduation**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Degree**: BA/BS MA/MS Ph.D.