



# **Application Form for Study Abroad**

at

**South East Technological  
University (SETU)**

and

**Carlow College, St. Patrick's  
(CCSP)**

# U.S. Study Abroad Application Form

## Section 1 – Personal Details

Date of Birth: _ _ / _ _ / _ _ _ _ (DD-MM-YYYY)	
Family Name <i>(as on passport)</i> :	
First Name <i>(as on passport)</i> :	
Home (Permanent) address:	
Male/Female <i>(please circle)</i>	Nationality:
E-mail Address to be Used for Correspondence:	
Contact phone number:	
Emergency contact <i>(Please detail the contact details of the person who should be contacted in the event of an emergency. Please tell the designated person that their details have been provided.)</i>	
Name:	
Relationship to you:	
Phone number:	
E-Mail address to be used for correspondence:	

## Section 2 – Undergraduate Institution(s)

*Certified copies of your third-level academic transcripts should be attached to application*

Name of institution:	
Stage of studies:	Major:
Name of institution:	
Stage of studies:	Major:

### Section 3 – Programme Information and Course Selection

Academic Year (e.g. 2021/2022):	20__ / __
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Term (please put an 'X'):	<b>Autumn</b> ____ OR <b>Spring</b> ____
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Learners should consult with their home institution or study abroad provider to ensure their chosen courses will transfer back to their academic programme of study in the United States.

You must receive pre-approval from your home institution or provider for all ten of the courses listed before starting your semester at CCSP and SETU. On arrival you will chose, at minimum, four courses from your pre-approved list.

**The availability of courses is subject to timetabling constraints.**

CCSP Course Title and Course Code	Articulation Code at Home Institution or Provider
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Irish Experience (Mandatory)	
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SETU (Carlow) Course Title and Course Code	Articulation Code at Home Institution or Provider
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#### Section 4 – Home Institution or Provider Details

##### Name of Home Institution or Provider:

Name and Postal Address of Officer or Coordinator to whom transcripts should be sent to upon completion of your studies at CCSP and SETU:

Email address of Officer or Coordinator to whom electronic transcripts should be sent to upon completion of your studies at CCSP and SETU:

### Personal Disclosures

#### Section 1 – Supports for a Disability or Learning Difference Disclosure

Do you have a disability or any learning difference(s) you wish to seek learning supports for?

**Yes / No**

**If you answer ‘yes’, please provide a letter from your home institutions’ Disability Office outlining your needs as part of this application process.**

#### Section 2 – Medical Condition Disclosure

Do you have any medical condition(s) you wish to seek supports for?

**Yes / No**

**If ‘Yes’, please describe the condition(s) and indicate the types of supports which you typically require. This will help us to plan supports for your condition(s) prior to your arrival:**

### Consent for Processing Personal Data

If you have provided us with information about a medical condition, learning difference or disability, we must have your explicit consent before we can use it. Please indicate your consent by ticking the relevant box(es).

I consent to the processing of my medical information.

I consent to the processing of my disability / learning difference information.

You may grant, refuse or withdraw your consent at any time. Withdrawal of consent does not affect the lawfulness of processing before its withdrawal. If you wish to withdraw any consent you have given, please send an email to the following email addresses at CCSP and SETU: [intloffice@carlowcollege.ie](mailto:intloffice@carlowcollege.ie) and [Donal.McAlister@setu.ie](mailto:Donal.McAlister@setu.ie).

### Application Signature

I certify that the details given in this application and the associated documents are true to the best of my knowledge and belief.

I have read and understand the *Study Abroad Terms and Conditions* provided by my home institution or study abroad provider and agree to be bound by them. I understand that non-adherence to the conditions may result in the termination of my participation in the Study Abroad Programme.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Application Checklist and Declaration

Have you completed and / or enclosed / attached the following?

- **Photocopy of your passport (photo page)**
- **Certified copies of your academic transcripts meeting the academic entry requirements for the programme**
- **Personal Disclosure – disability or learning difference (if applicable)**
- **Personal Disclosure – medical condition (if applicable)**

Completed forms should be processed through the International Office at your home institution or study abroad provider.