



Student Name: _____ RAM ID #: _____

.EDU Email: _____ Cell #: _____

Year of Program Abroad: _____

Term Abroad (circle) FALL WINTER INTERSESSION SPRING SUMMER

**For Spring Break or Thanksgiving Break, please circle the spring or fall term respectively.*

I understand that a non-refundable and non-transferable \$60 application fee will be charged to my student account.

I understand this application fee is a required component of my study abroad application and is not contingent upon program acceptance.

I understand it is my responsibility to provide a receipt of payment to the Study Abroad Office in the Office of International Education and Programs (Laffin Hall, 320).

Please note non-FSC students must consult with the FSC Study Abroad office prior to making this payment.

Student Signature **Date**

Please submit this form and your application fee payment of \$60 directly to the office of Student Accounts in the form of:

- Check
- Money order
- Cash
- Credit card

Received by the Office of Student Accounts:

Name **Date**

Please submit a receipt of payment to the Study Abroad Office, Laffin Hall 320