



CENTER FOR INTERNATIONAL AND COMPARATIVE LAW

APPLICATION FOR STUDY AT UNIVERSITY COLLEGE CORK, IRELAND
(Please type or print)

Form fields for personal information: Last Name, First Name, Middle Initial, Mr/Mrs/Ms/Dr, Banner Number, Local Phone Number, E-mail Address, School Address, City, State, Zip Code, Permanent Address, City, State, Zip Code, Date of birth, Place of Birth: City, State, Country, Citizenship: U.S. Citizen, Non-U.S. Citizen, Country of citizenship.

Non-U.S. Citizens only: Are you a Permanent Resident Alien? O Yes O No
If yes, please attach a copy of your permanent resident card, including the front and back sides.

EMERGENCY NOTIFICATION

In case of emergency please contact:

Emergency contact form fields: Last Name, First Name, Relationship to Applicant, Phone, Address, City, State, Zip Code.

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**FINANCIAL AID OFFICE APPROVAL—SCHOOL OF LAW**

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The signature below certifies that based on this student's study abroad program and Financial Aid Consortium Agreement (please check and complete Option A or Option B):

**Option A:** This student will not be eligible to receive/will not be borrowing any university, federal or state student aid programs during their Study Abroad enrollment period. Upon the student's return to Saint Louis University School of Law for the \_\_\_\_\_ semester, the student will be eligible for aid, contingent on FAFSA filing by March 1 and meeting renewal eligibility requirements.

Notes:

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**Option B:** This student will be eligible to receive the following federal/state student aid programs for their Study Abroad enrollment period. Upon the student's return to Saint Louis University School of Law for the \_\_\_\_\_ semester, the student will be for eligible aid, contingent on FAFSA filing by March 1 and meeting renewal eligibility requirements. *Note: A Financial Aid Consortium form is required to receive aid for a study abroad program.*

Notes:

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\_\_\_\_\_  
Financial Aid Coordinator  
School of Law

Approved  
 Not Approved

\_\_\_\_\_  
Date

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**OFFICE OF STUDENT SERVICES APPROVAL**

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**Students who are interested in participating in the University College Cork Semester in Ireland must obtain preliminary authorization from the departments listed on this sheet and provide the documentation it requests.**

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Year in School: 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup>     Full-time     Part-time    Cumulative GPA \_\_\_\_\_    Credit Hours Completed \_\_\_\_\_

**The Following Approve or Do Not Approve this Proposal:**

\_\_\_\_\_  
**Assistant Director  
Center for International and Comparative Law**

Approved  
 Not Approved

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Assistant Dean of Students**

Approved  
 Not Approved

\_\_\_\_\_  
Date

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**STUDENT SIGNATURE AND CONFIRMATION**

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My signature below indicates that:

1. I have confirmed with the University's Bursar's Office that my account is in good standing.
2. I have already taken \_\_\_\_\_ total credit hours outside of SLU Law
3. I understand I will receive a maximum of 12 credits from SLU Law for this program
4. I understand that I must take six courses from among the undergraduate (BCL) subjects and graduate (LLM) seminars, generally three subjects in each program.
5. I understand this program's courses will be reported on my transcript with letter grades but will not be factored into my G.P.A.

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**Signature of Student**

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**Date**

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**DOCUMENTS REQUIRED TO BE ATTACHED TO THIS PROPOSAL**

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My signature below indicates that I have attached to this proposal the following required documents and wish to be considered for this semester program:

- \_\_\_\_\_ Current Resume
- \_\_\_\_\_ Transcript (unofficial transcript from Banner is acceptable)
- \_\_\_\_\_ Signed Statement of Understanding, Responsibility and Risk (available on Web site and in Student Services)
- \_\_\_\_\_ Signed International Insurance Application Form (available on Web site and in Student Services)
- \_\_\_\_\_ Signed International Student ID Card Application with passport-sized photograph (available on Web site and in Student Services; (photograph can be purchased at International Services Center)
- \_\_\_\_\_ Copy of Passport
- \_\_\_\_\_ A brief statement of your purpose in applying to this program. Please limit your statement to 500 words.

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**Signature of Student**

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**Date**