



CENTER FOR INTERNATIONAL AND COMPARATIVE LAW

APPLICATION FOR STUDY AT UNIVERSITÉ D'ORLÉANS, FRANCE
(Please type or print)

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? Yes No
If yes, please attach a copy of your permanent resident card, including the front and back sides.

LANGUAGE BACKGROUND

What is your primary language?
Note: You must have sufficient command of the French language to be considered for this semester abroad program)
Secondary Language #1 Conversational (choose one) Fluent Strong Marginal
Written (choose one) Fluent Strong Marginal
Secondary Language #2 Conversational (choose one) Fluent Strong Marginal
Written (choose one) Fluent Strong Marginal
Do you intend on pursuing the Master's degree at Université d'Orléans upon completion of the J.D. degree at St. Louis University School of Law? Yes No

EMERGENCY NOTIFICATION

In case of emergency please contact:
Last Name, First Name, Relationship to Applicant, Phone, Address, City, State, Zip Code

FINANCIAL AID OFFICE APPROVAL—SCHOOL OF LAW

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:

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:

**Financial Aid Coordinator
School of Law**

Approved
 Not Approved

Date

OFFICE OF STUDENT SERVICES APPROVAL

Students who are interested in participating in the Université d'Orléans Semester in France must obtain preliminary authorization from the departments listed on this sheet and provide the documentation it requests.

Year in School: 1st 2nd 3rd 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

STUDENT SIGNATURE AND CONFIRMATION

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 14 credits from SLU Law for this program.
4. 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.

Signature of Student

Date

DOCUMENTS REQUIRED TO BE ATTACHED TO THIS PROPOSAL

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

Signature of Student

Date