

2121 Euclid Ave. BH 412 Cleveland, OH 44115 Phone: (216) 687-3910 Fax: (216) 687-3965 www.csuohio.edu/csuea

General Approval Application for Study Abroad

I. Personal Information

Name of Student		Email Address		
Cell Phone	Secondary number	Student ID Number	Academic Adviser	
Current Address		Major/Degree	Year/Class	
City St	ate Zip Code	GPA		
Permanent/Home Ad	dress	Passport # (If Currently Kno	ewn) Expiration Date (M/DD/YYYY)	
City St	ate Zip Code ation	Country of Citizenship		
Name of Study Abroad Program/University		Sponsoring Organization	Sponsoring Organization	
City	Country	Begin Date (M/DD/YYYY)	End Date (M/DD/YYYY)	
II. Emergency Con Name of Contact	tact	Relationship to Student		
Cell	Secondary number	Email Address	Email Address	
Current Address		City State	7to Code	
V. Release of Info			Zip Code	
disciplinary records or point the Center for Interior Program. By signing the Rights and Privacy Act	rmation Waiver The of Judicial Affairs at Cleveland State Underovide any information regarding any discipational Services and Programs. I unders is form, I also understand that I have waived (FERPA). This permission is valid from the riod of one semester or until my program a	plinary proceedings against me, and/o tand that the information discussed my right to information that is consid time I submit this signed document	of Student Life, permission to discuss and the outcome of Student Conduct Hearing will be for the purposes of the Study Abroa ered confidential under the Family Education	