



BUCKNELL UNIVERSITY
Application for Bucknell on the Susquehanna ~ Fall 2010

To Be Completed by the Student:

_____ / _____ / _____ Gender (circle one): M or F
 Last Name First Name M.I.

BUID # _____ Date of Birth ____ / ____ / ____ Citizenship: _____

College: A&S / ENG _____ Class Year: _____ International Students Only: Visa Type F1 / J1: _____

Major(s): _____ Minor: _____ Current GPA: _____

Concentration (IR majors only): _____ IR Language: _____

Academic Adviser(s): _____ / _____

Professors Providing Recommendation (required): _____

Local Address (Please include campus box number)	Permanent Address
Address: _____ _____	Address: _____ _____
Phone/Cell #: _____	Phone #: _____
Email: _____	Email: _____

Emergency Contact Information (Please list a contact that can be reached during the duration of the program):

Name: _____ Relationship to applicant: _____

Address: _____ Phone#: _____
 (If different from permanent address above)

Mother/Guardian work phone: _____ Father/Guardian work phone: _____

Mother/Guardian email address: _____ Father/Guardian email address: _____

Code of Conduct/Disciplinary Record

Bucknell University is concerned about the disciplinary record of students applying to participate in off-campus study. This record may impact the approval of this application. Your response will be verified with the Dean of Students.

Have you ever received points for violating the Student Code of Conduct on or off campus?

Yes No If yes, please explain (attach extra pages if necessary):

Are you, or have you been, on Academic Probation?

Yes No If yes, please explain (attach extra pages if necessary):

Bucknell on the Susquehanna Application Checklist

A complete Bucknell on the Susquehanna application includes the following items: (applications will not be reviewed until complete)

- Bucknell on the Susquehanna Application Form**
- Faculty Recommendation:** Request recommendation from faculty under whom you have studied for at least one semester. The recommendation should be provided by a faculty member other than your academic adviser.
- Academic Adviser Approval Form:** If you have declared two majors, both academic advisors must complete and sign this form.
- Statement of Purpose:** (250-500 word) Please write an essay addressing the following the following topics:
 - Why are you interested in the Bucknell on the Susquehanna program?
 - What do you hope to get out of Bucknell on the Susquehanna?
 - Describe your outdoor, first aid, or other relevant experience.
- 2 Passport-sized regulation photos:** Please write your full name on the back of each photo.
- Copy of Driver's License & BUID:** You must provide a copy of your Driver's License and BUID to the Office of International Education.

*-Applications for the Bucknell on the Susquehanna program will be accepted until **February 5, 2010**. Since admissions to the program are extremely limited and made on a rolling basis, please submit your completed application as early as possible (December 15, 2009 strongly preferred and recommended).*

-You will be notified of your admission status after sufficient time for application review by the Office of International Education and faculty involved in the program. Individual candidate interviews may be required at the discretion of the program directors.

Application Deadline

The Bucknell on the Susquehanna Application Form, and all materials listed above, must be submitted to the Office of International Education

by:

****February 5, 2010****

(December 15, 2009 recommended)

By signing below, I, _____, verify that the information in this application is complete and correct to the best of my knowledge. I understand that any action on this application is contingent upon review of my Bucknell University transcript until the time of departure for the program. I further understand that, if I incur any Code of Conduct sanction prior to my departure off campus, this may result in the withdrawal of Bucknell University approval to participate in the Bucknell in Scotland program.

I understand that Bucknell's social and disciplinary policy is based upon the premise that its students remain Bucknell students while abroad, and that they should conduct themselves as guests of the host country. I understand that I am expected to abide by the regulations of Bucknell University and by the laws and customs of Scotland. I will be legally subject to the same laws that govern Scotland's citizens as well as the regulations that govern local students. I understand that the Bucknell in Scotland program is an academic community and that students participating on this program are expected to respect the rights of other students, the staff, the faculty, and the guest lecturers. I understand that should I violate the conduct or academic codes of Bucknell or the laws of Scotland, I will be subject to immediate dismissal from the program.

Signature: _____ **Date:** _____



Faculty Recommendation for Off-Campus Study

To Be Completed by the Student:

Name of Applicant: _____

I.D. Number: _____

Proposed Programs 1. _____ Semester off campus: _____

Applicant's Waiver of Right of Access to Confidential Statement

Under the Family Educational Rights and Privacy Act of 1974, as amended, students have a right to certain education records.

I hereby freely and voluntarily waive my rights to any information contained in this recommendation form and agree that it shall remain confidential.

I do not waive my rights to any information contained in this recommendation form.

Student Signature

Date

To the Professor Completing this Form:

This recommendation will be reviewed by the Office of International Education and may be forwarded to the program provider or overseas institution as necessary. Your candid assessment of the student is vital to the placement process. If you do not feel qualified to assess the student, please ask him/her to choose another evaluator. Should you have any questions about the program(s) the student is proposing, please feel free to contact the Office of International Education at 7-3796. You may also submit a letter of recommendation which includes the requested information in lieu of this form. As a signature is required to forward this form to the program, emails cannot be accepted.

Professor's Recommendation:

1. *In what capacity and for how long have you known the applicant? In which course(s) have you taught the applicant and when?*

2. *Please describe the course in which you taught the student in terms of assignments required and performance of the applicant in relation to his/her peers.*

3. Using the box below, please rate the applicant, in relation to other students in the course, on each of the following criteria.

	Poor (Lower 10% of the class)	Average	Above Average	Outstanding (Upper 10% of class)	Unable to comment
Overall Academic performance					
Intellectual motivation					
Writing ability					
Quantitative ability					
Critical Thinking					
In class participation					
Class attendance					
Ability to work with peers					

4. Please comment briefly on this student's academic strengths and motivations for studying off campus. To the extent possible, please assess the student's maturity, stability, independence, and ability to adjust to off-campus study.

5. Would you welcome this student as a participant on a program you are leading? (Circle one)

Yes, without reservation

Yes, with reservations (please specify)

No

Please provide any additional comments or list any special considerations of which we should be aware.

Signature _____ Date _____

Name _____ Department _____

Please return to the Office of International Education as soon as possible (but no later than) February 11, 2010.



Academic Adviser Approval Form for Off-Campus Study

To be completed by the Student: Please complete the information below as well as the worksheet on the back of this form.

Name of Applicant: _____ ID#: _____

Major(s): _____ Degree Program (BS, BA, etc.): _____

Off-Campus Studies Program(s): _____

To the Adviser(s) Completing this Form:

A signature is required from both advisers if the student has declared two majors.

Please review the student's plans for off-campus study to ensure:

- 1) that the program is academically appropriate;
- 2) that the semester(s) chosen for off-campus study is suitable given the requirements for the major, and;
- 3) that the student will be able to meet all degree requirements (including W2 courses) despite off-campus study.

Please note: Bachelor of Arts students should have fulfilled the majority of their distribution requirements by the end of the sophomore year (i.e., four humanities, two social sciences, two lab sciences and a third approved course from the natural sciences/math division).

Major 1 Major 2

_____ I have reviewed with the student, if pursuing a B.A. degree, the need to complete all distribution requirements by the semester to be spent off campus and have advised him/her concerning options for so doing. (If unable to complete them, please explain below.)

_____ I have reviewed with the student his/her progress toward meeting the writing requirement and have advised him/her concerning options for completing it.

_____ I have reviewed with the student his/her progress toward meeting requirements for the major or intended major.

_____ I approve of this student's plans to study off campus.

_____ I approve with the following reservations and/or requirements.

COMMENTS:

Current Academic Adviser

Signature _____ Date _____

Name _____ Department _____

Academic Adviser # 2 (for students with declared double majors):

Signature _____ Date _____

Name _____ Department _____

Please return to the Office of International Education as soon as possible (but no later than) February 11, 2010.

Academic Worksheet

Complete this form to the best of your ability prior to seeing your advisor. When meeting with your advisor, discuss your degree requirements, as well as which of these requirements you may take while off campus.

Courses completed first year (Fall)	
Course and number <i>(e.g. FOUN 096)</i>	Requirement(s) fulfilled <i>(e.g. FOUN/W1/human diversity)</i>

Courses completed first year (Spring)	
Course and number <i>(e.g. FOUN 096)</i>	Requirement(s) fulfilled <i>(e.g. FOUN/W1/human diversity)</i>

Courses completed second year (Fall)	
Course and number <i>(e.g. POLS 210)</i>	Requirement(s) fulfilled <i>(e.g. Social science/major)</i>

Courses completed second year (Spring)	
Course and number <i>(e.g. POLS 210)</i>	Requirement(s) fulfilled <i>(e.g. Social science/major)</i>

Courses to be completed third year (Fall) <i>**If you will be abroad, indicate requirements to be fulfilled through program</i>	
Course <i>(e.g. English)</i>	Requirement(s) fulfilled <i>(e.g. humanities/major/ Medieval)</i>

Courses to be completed third year (Spring) <i>**If you will be abroad, indicate requirements to be fulfilled through program</i>	
Course <i>(e.g. English)</i>	Requirement(s) fulfilled <i>(e.g. humanities/major/ Medieval)</i>

Courses to be completed fourth year (Fall) <i>**If you will be abroad, indicate requirements to be fulfilled through program</i>	
Course <i>(e.g. BIOL)</i>	Requirement(s) fulfilled <i>(e.g. lab science/major/ CAPS)</i>

Courses to be completed fourth year (Spring)	
Course <i>(e.g. BIOL)</i>	Requirement(s) fulfilled <i>(e.g. lab science/major/ CAPS)</i>

