ACM OFF-CAMPUS STUDY PROGRAMS APPLICATION

All application materials must be received by the ACM Chicago Office by the deadlines indicated below. Typically, students will be notified about acceptance into the program within 2-4 weeks after the application deadline.

While preference will be given to students who have met the application deadline, late applications may be accepted on a space-available basis. If the application deadline has passed and you are still interested in applying for a program, please submit your application immediately and contact the ACM Office. Students from non-ACM colleges are accepted on a space-available basis and should also contact the ACM Office to receive information on costs and billing.

APPLICATION DEADLINES

<table>
<thead>
<tr>
<th>Date</th>
<th>Program(s)</th>
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</thead>
<tbody>
<tr>
<td>January 13, 2009</td>
<td>Fall 2009 Japan Study</td>
</tr>
<tr>
<td>March 1, 2009</td>
<td>Fall 2009 Oak Ridge Science Semester</td>
</tr>
<tr>
<td>March 15, 2009</td>
<td>▪ Summer 2009 – All short-term summer programs</td>
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<td></td>
<td>▪ Fall 2009 – All programs (except Japan Study &amp; Oak Ridge Science Semester)</td>
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<tr>
<td></td>
<td>▪ Early application date for all Spring 2010 programs*</td>
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<tr>
<td>October 15, 2009</td>
<td>Spring 2010 – All international programs</td>
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<td>October 31, 2009</td>
<td>Spring 2010 – All U.S.-based programs</td>
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* The "early application" date is typically meant for students whose college requires all off-campus study applications for the entire upcoming academic year to be completed the year prior to off-campus study. If your college does not require an early application for programs in the spring of the following academic year, feel free to apply using either the early or the regular application date.

Application Instructions

1. IMPORTANT: Please contact your college’s Off-Campus Studies Office immediately to discuss your off-campus study plans and to receive information regarding the specific application procedures and deadlines for your campus. Your college’s application process may involve additional application materials, and campus deadlines may be considerably earlier than the ACM deadlines. This process should be completed as early as possible, so that your application will meet any campus deadlines as well as the ACM deadline. If your campus does not have an Off-Campus Studies Office, speak with the appropriate faculty advisor for the program on your campus.

2. Request an official copy of your academic transcript from the Registrar’s Office, to be submitted with your application.

3. Obtain three letters of recommendation (recommendation forms are included with this application). Two should be from faculty members at your college (including at least one faculty recommendation from a professor in an area pertinent to the program’s academic content). The third can also be from a faculty member, or may be written by an academic administrator, employer, manager, internship supervisor, etc.

4. Obtain the required campus approval signatures on the “Approval & Required Signatures” form.

5. Make TWO COPIES of your application materials (original plus one additional), and submit your application, including supporting documentation. Each campus has different procedures, so please check to determine whether you should send ACM the application materials yourself or if your Off-Campus Studies Office or faculty program advisor will send your application materials for you. All application materials should be sent to:

   Associated Colleges of the Midwest – (Name of program)
   205 W. Wacker Drive, Suite 220
   Chicago, IL 60606 USA
ACM OFF-CAMPUS STUDY PROGRAMS APPLICATION  
www.acm.edu  •  ASSOCIATED COLLEGES OF THE MIDWEST  •  312.263.5000

Program Information

Please indicate the semester, year, and program for which you are applying:

FALL _____ YEAR
☐ Chicago Programs – Business, Entrepreneurship, & Society
☐ Chicago Programs – Chicago Arts
☐ Chicago Programs – Urban Studies
☐ Costa Rica – Latin American Culture & Society
☐ Florence Program
☐ Newberry Seminar in the Humanities
☐ India Studies
☐ Tanzania – Human Evolution & Ecology

Japan Study program – Please apply at: www.earlham.edu/~jpons
Oak Ridge Science Semester – Please use the ORSS application found at: www.acm.edu/apply.

SUNummer _____ YEAR
☐ India Summer Program – Service Learning & Cultural Immersion
☐ Mexico Summer Program – Service Learning & Language Immersion

SPRING _____ YEAR
☐ Botswana- Culture & Society in Africa
☐ Chicago Programs – Business, Entrepreneurship, & Society
☐ Chicago Programs – Chicago Arts
☐ Chicago Programs – Urban Studies
☐ Costa Rica – Field Research
London & Florence – Arts in Context (select option below)
☐ Florence first option - with intensive Italian language
☐ London first option
☐ Florence only option - short-term, with intensive language

Newberry short-term spring seminars – Please use the shorter application found at: www.acm.edu/newberryshortapply.

If you are not accepted into your first choice program, is there a second choice that would be of interest to you?  ☐ Yes  ☐ No

If so, which program and date would be your second choice?  ____________________________________________  ____________________________________________

How did you hear about ACM’s off-campus study programs?  (please check all that apply)
☐ Student who participated  ☐ Classroom presentation  ☐ ACM representative  ☐ Internet search (i.e. Google)
☐ Faculty/staff member  ☐ Campus fair  ☐ Off-campus study office  ☐ ACM website
☐ Parent/family  ☐ Informational meeting  ☐ Brochure  ☐ Campus website
☐ Campus program advisor  ☐ Table on-campus  ☐ Poster  ☐ Other: ____________________________________________

Personal & Academic Information

Full Name

E-Mail Address

Phone (Cell)

Phone (Home)

Street Address (College)

City, State, Zip (College)

Street Address (Permanent/Home)

City, State, Zip (Permanent/Home)

Birthdate: ___/___/____  Gender: ☐ Female  ☐ Male

Country of Citizenship

College

College Major(s) and Minor(s)

Anticipated academic standing when program begins:
☐ Freshman  ☐ Sophomore  ☐ Junior  ☐ Senior

Anticipated Graduation Date: Month__________ Year__________

Cumulative GPA (on a 4.0 scale): __________

Name of Parents or Guardians*

If you will be at a different address or phone number during the application process (including summer months), please include this information below:

Address

Phone Number

Dates Valid (From-To)

* Note: ACM may notify your parents/guardians about your acceptance and send them important information, such as a copy of the student handbook.
References (Please use the Academic Program Recommendation forms included in this application packet.)

1. Name_________________________  Title/Department_________________________
2. Name_________________________  Title/Department_________________________
3. Name_________________________  Title/Department_________________________

Passport Information (International Programs only)

Do you have a passport that is valid at least six months after the END DATE of your program?  ☐ Yes  ☐ No

Passport number: _________________________________  Expiration date: _________________________________

If NO, you must either: [1] apply for a new passport or [2] renew your old passport immediately.
For more details on passport application and renewal, please visit: www.travel.state.gov.

Essay

Please answer the following essay on a separate sheet of paper. The essay should be approximately 300-500 words, typed and proofread, and should reflect the depth of your interest in this program.

Explain in some detail why you want to participate in this specific program, with particular reference to academic and personal goals and expectations. How would study on the program contribute to your educational goals in ways not possible through on-campus study? What strengths, talents, interests, and background do you have that would make you a good candidate for the program? Please mention any special interests (whether or not directly related to the program’s content) that you plan to pursue during your participation in the program.

Short-Answer Questions

Please type your responses to the following questions on additional pages. Be sure to number your responses and attach the additional sheets to the application form.

Note: There are additional program-specific questions on the following two pages. Please check to see if the program for which you are applying requires answers to additional questions.

1. List all courses not on your transcript that you will have completed before the beginning of the program.
2. What coursework, reading, or study have you completed in areas related to the program for which you are applying?
3. Have you actively participated in an independent study program, field study, research project, or internship? If so, describe the work and its end product in detail, including information such as field, sources, format, method of evaluations, etc.
4. List any extracurricular activities, leadership positions, honors, awards, or special recognition you have received.
5. Do you have any health concerns about which you would like to inform us? You may wish to include anything that might affect your housing needs, your mobility, or your ability to participate in a physically, intellectually, and emotionally challenging program. Feel free to include any information about food restrictions, allergies, special medications, or disabilities. Feel free to answer this question on a separate piece of paper, as this is for informational purposes only and will not be used to determine acceptance into the program. If you have any questions about health concerns, please feel free to contact us.
Additional Questions & Requirements – Please check the next TWO PAGES to see if your program is listed.

Please type your responses to the following questions on additional pages. Be sure to number your responses and attach the additional sheets to the application form.

APPLICANTS FOR ALL INTERNATIONAL PROGRAMS

6. Have you ever traveled or lived in either the country of the program for which you are applying or another foreign country? If so, discuss what you found challenging about traveling or living abroad. If not, discuss what might you see as potential academic and/or cultural challenges.

7. How much formal study have you had in foreign language(s)? What other experiences have you had which may have contributed to your knowledge of and ability to use foreign languages?

8. Do you have specific language proficiency that applies to the particular program for which you are applying? If so, what skill level have you achieved in this language (please be specific)? If not, do you plan on doing any language training specific to the country you are visiting before the start of the program?

COSTA RICA – SPRING FIELD RESEARCH PROGRAM APPLICANTS

The emphasis of this program is on independent field research in any field, encompassing a wide range of disciplines across the social sciences, humanities, and sciences. You are strongly urged to consult appropriate faculty members on your home campus about a project before you leave for Costa Rica. We will do our best to find an advisor whose expertise matches a special research interest, but students may also become involved with projects that match the interests and ongoing projects of the current advisors.

9. List any courses you have taken involving statistics, quantitative data analysis, and/or research methodology in the discipline in which you plan to conduct field study in Costa Rica. If you plan a project in the humanities, list relevant courses in art, literature, etc.

10. Describe the course work, field research, and informal study (books, films, articles, etc.) you have been doing to prepare for a semester in Costa Rica. What attracts you to a fieldwork experience? What strengths, talents, interests, and background do you have which would make you a good candidate for this kind of research? (1-2 paragraphs)

11. Please outline a detailed preliminary proposal describing the type of field research you would like to do and indicating the professor(s) you have consulted. Your proposal should include the central question and hypothesis you wish to explore, along with methods you might use to investigate this hypothesis. (1 page)

Please also complete the Language Evaluation Form included in this application, indicating level of Spanish language.

TANZANIA PROGRAM APPLICANTS

9. For six weeks, students will live in tent camps in Northern Tanzania. Conditions may be arduous. Briefly describe any previous camping experience you may have.

10. What type of independent research project would you like to complete while in Tanzania? If you do not have a specific topic in mind, what are some areas of interest that you might wish to investigate?

INDIA STUDIES PROGRAM APPLICANTS

9. What type of independent research project would you like to complete while in India? If you do not have a specific topic in mind, what are some areas of interest that you might wish to investigate?
BRAZIL EXCHANGE PROGRAM APPLICANTS

Please complete the Language Evaluation Form included in this application. If you have competency in both Portuguese and Spanish, please submit two forms.

MEXICO SUMMER PROGRAM APPLICANTS

Please complete the Language Evaluation Form included in this application. Also, since this is a summer program, the “Approval & Required Signatures” sheet may not be required by your campus. Please check with your Off-Campus Studies staff to see if completion of this approval form will be necessary.

INDIA SUMMER PROGRAM APPLICANTS

Since this is a summer program, the “Approval & Required Signatures” sheet may not be required by your campus. Please check with your Off-Campus Studies staff to see if completion of this approval form will be necessary.

NEWBERRY SEMINAR IN THE HUMANITIES APPLICANTS

The Newberry Seminar emphasizes independent research in the humanities drawing upon the materials of the Newberry Library; students participate in an interdisciplinary humanities seminar and complete a substantial research paper. The following questions give you an opportunity to describe your experiences and interest in independent study.

6. As you’ll see from a quick glance at the Newberry’s website (http://newberry.org/collections/collections.html), the library has a vast range of resources. Which areas of the Newberry’s holdings most intrigue you and complement areas of research in which you’ve already worked? To what extent have you already explored some of the issues included in this year’s seminar?

7. Although you will be able to revise your project proposal once the seminar begins, please describe your current thoughts about the type of project you’d like to pursue in the Newberry Seminar. How does it tie in with the theme of the seminar and connect to the holdings of the Newberry? How have the courses you’ve taken in college so far prepared you to approach such a project?
Language Evaluation Form (Only required for Costa Rica, Brazil Exchange, & Mexico Summer programs)

Applicant Name ____________________________________________________________

ACM Program Choice

Please check one: □ SPANISH language evaluation □ PORTUGUESE language evaluation

FOR THE STUDENT:
Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this evaluation, and I understand that this evaluation will be used only for the purpose for which it was prepared.

□ Yes □ No ________________________________________________________________
Applicant Signature Date

FOR THE SPANISH/PORTUGUESE PROFESSOR OR EVALUATOR:
Your candid assessment of this student’s foreign language skills will be important in the Selection Committee’s final decision. Please consider your answers carefully; if possible, read the student’s completed application and/or review the objectives of the program outlined in the current program brochure and online at www.acm.edu.

WHEN ANSWERING THE FOLLOWING QUESTIONS, PLEASE USE THE OPPOSITE SIDE OF THIS PAGE OR A SEPARATE SHEET OF PAPER, AND NUMBER YOUR RESPONSES.

1. How long have you known this student? In what capacity?

2. Please assess this student’s foreign language communication abilities, keeping in mind what is likely to be required in an off-campus study setting. Circle the appropriate assessment number below:

   Speaking: 1 – Lacks the basic skills necessary for daily interaction
              2 – Has limited skills and can communicate particular needs, but with difficulty
              3 – Communicates effectively in certain areas and can improvise around gaps in knowledge
              4 – Has well-developed language abilities, and is near-fluent in most communication
              5 – Extremely fluent for a non-native speaker

   Writing: 1 2 3 4 5

   Listening Comprehension: 1 2 3 4 5

   Reading Comprehension: 1 2 3 4 5

3. Are you aware of other experiences which have contributed to the applicant’s language knowledge and abilities? Consider languages spoken at home, high school language work, travel abroad, work with native speakers, etc.

4. Please comment on the applicant’s language learning ability and performance in the classroom.

5. Does the applicant have the language skills necessary for a program where courses are taught in this language?

6. Please offer any other comments you believe would help the Selection Committee assess the applicant’s ability or motivation to use their foreign language skills and to participate in this program.

Evaluator’s Name (please type or print) ____________________________________________

___________________________________________ Date
Signature

___________________________________________
Title/Department

College

________________________________________________________________________

Please return this form to the applicant, Off-Campus Studies Office, or the Campus Program Program Advisor.
ACM OFF-CAMPUS STUDY PROGRAMS APPLICATION

Applicant Name _____________________________ ACM Program Choice _____________________________

FOR THE STUDENT:
Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this recommendation, and I understand that this recommendation will be used only for the purpose for which it was prepared.

☐ Yes  ☐ No _____________________________ _____________________________
Applicant Signature Date

FOR THE RECOMMENDER:
How long have you known this student? ______________________________________________________________

In what capacity? __________________________________________________________________________________

Your candid assessment of the strengths of this student’s application to an ACM Off-Campus Study Program will be important in the Selection Committee’s final decision. Please consider your answers carefully; if possible, read the student’s completed application and/or review the objectives of the program outlined in the current program brochure and online at www.acm.edu. Thank you in advance from the members of the Selection Committee.

WHEN ANSWERING THE FOLLOWING QUESTIONS, PLEASE USE THE OPPOSITE SIDE OF THIS PAGE OR A SEPARATE SHEET OF PAPER, AND NUMBER YOUR RESPONSES.

1. How would study on this program and in this location complement the student’s on-campus studies?

2. In what ways is the applicant adequately prepared for this program through formal academic work?

3. What is your overall estimate of the applicant’s intellectual ability, academic motivation, and consistency of effort?

4. Please describe any other particular strengths of the applicant which will likely be assets to the program.

5. Off-campus programs require emotional maturity, self-discipline, initiative, and a certain amount of physical stamina. Participants must be able to adjust to different cultural influences, function as an active member of a group without generating friction, keep up with a rigorous schedule, take some initiative in using free time effectively, and maintain academic study habits in an off-campus situation. What difficulties, if any, might the applicant experience with regard to this program?

6. Please add any comments you believe will be helpful to the Selection Committee.

Recommender’s Name (please type or print) ____________________________________________

___________________________________________ _____________________________
Signature Title/Department

___________________________________________ _____________________________
College Date

Please return this form to the applicant, Off-Campus Studies Office, or the Campus Program Advisor.
ACM OFF-CAMPUS STUDY PROGRAMS APPLICATION

FOR THE STUDENT:
Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this recommendation, and I understand that this recommendation will be used only for the purpose for which it was prepared.

☐ Yes  ☐ No
_________________________________________     _______________________________
Applicant Signature                          Date

FOR THE RECOMMENDER:
How long have you known this student? ________________________________________________________________

In what capacity? __________________________________________________________________________________

Your candid assessment of the strengths of this student’s application to an ACM Off-Campus Study Program will be important in the Selection Committee’s final decision. Please consider your answers carefully; if possible, read the student’s completed application and/or review the objectives of the program outlined in the current program brochure and online at www.acm.edu. Thank you in advance from the members of the Selection Committee.

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6. Please add any comments you believe will be helpful to the Selection Committee.

Recommender’s Name (please type or print) ________________________________________________________________

_________________________________________     _______________________________
Signature                          Title/Department

_________________________________________     _______________________________
College                          Date

Please return this form to the applicant, Off-Campus Studies Office, or the Campus Program Advisor.
ACM OFF-CAMPUS STUDY PROGRAMS APPLICATION
www.acm.edu • ASSOCIATED COLLEGES OF THE MIDWEST • 312.263.5000

ACADEMIC PROGRAM RECOMMENDATION

Applicant Name ___________________________ ACM Program Choice ___________________________

FOR THE STUDENT:
Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this recommendation, and I understand that this recommendation will be used only for the purpose for which it was prepared.

☐ Yes  ☐ No
Applicant Signature ___________________________ Date ___________________________

FOR THE RECOMMENDER:
How long have you known this student? ___________________________

In what capacity? ___________________________

Your candid assessment of the strengths of this student’s application to an ACM Off-Campus Study Program will be important in the Selection Committee’s final decision. Please consider your answers carefully; if possible, read the student’s completed application and/or review the objectives of the program outlined in the current program brochure and online at www.acm.edu. Thank you in advance from the members of the Selection Committee.

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6. Please add any comments you believe will be helpful to the Selection Committee.

Recommender’s Name (please type or print) ___________________________

Signature __________________________________ Title/Department ___________________________

College ___________________________ Date ___________________________

Please return this form to the applicant, Off-Campus Studies Office, or the Campus Program Advisor.