



Academic Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

Classification:  Freshman  Sophomore  Junior  Senior  Graduate Student

Cumulative GPA: \_\_\_\_\_ Academic Advisor(s): \_\_\_\_\_

**Academic References**

_____	_____
Name	Department
_____	_____
E-Mail	Phone
_____	
Campus Address	

_____	_____
Name	Department
_____	_____
E-Mail	Phone
_____	
Campus Address	

Please describe any medical problems (including any allergies and required medicines) which would have an effect on your stay abroad.

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Please describe any special accommodations or needs that must be considered in placing you in Study Abroad programs.

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\_\_\_\_\_

\_\_\_\_\_

**Previous Travel:**

Have you ever traveled, studied or lived outside of the United States?  Yes  No  
When/How Long?

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Have you studied any foreign languages?  Yes  No If yes, what language(s)?

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Why would you like to participate in this program? (Give a brief summary.)

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How did you hear about this study abroad program?

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**Community Involvement/Service:**

Please list the organizations and activities you have been involved in, along with your role in each. (Example: SMILE, Jr. MANRRS, 4-H, Pre-College program, community service). Attach additional pages if necessary.

Organizations, Clubs, etc.

Role

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Leadership Experience/Honors or Awards

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May the Office of Global Programs release your name, address or picture for publicity?

Yes     No

I certify that all statements on this form are true and accurate to the best of my knowledge. I give permission to the selection committee to verify the information provided in this application and to be publicized in a press release should I be awarded. Also, I will provide additional documentation if requested. I understand that if I am selected, I will be required to participate in each aspect of the program, and to follow the standards set by the Study Abroad Program.

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Signature Date

**For information about this Study Abroad Program**

Contact:  
Dr. Victor Njiti at 601-877-2446 or [vicnji@alcorn.edu](mailto:vicnji@alcorn.edu)  
Dr. Dovi Alipoe at 601-877-6543 or [alipoe@alcorn.edu](mailto:alipoe@alcorn.edu)

Note: All applicants must submit a current official university transcript.

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United States  
Department of  
Agriculture    National Institute  
of Food and  
Agriculture

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