



SPELMAN- MOREHOUSE EXCHANGE PROGRAM



APPLICATION 2014



UC San Diego

APPLICATION PROCEDURES

APPLICATION DEADLINE: February 14, 2014

Students may participate in the exchange program for one full academic year, or fall quarter/semester, or winter and spring quarters/spring semester.

Applications are available at Thurgood Marshall Academic Advising office beginning Winter 2014, Thurgood Marshall Administration Building, Room #120. You may also visit our website to print out an application:

<http://marshall.ucsd.edu/programs/spelman-morehouse-exchange-program.html>

TO BE ELIGIBLE AND MEET SELECTION CRITERIA, STUDENTS MUST:

- ◇ Have completed 90 quarter units with a 2.7 or higher grade-point average at the point of departure. At the time of applications students must have at least 66 QUARTER units with a 2.6 GPA.
Have the appropriate academic preparation in the major field of study, or field of interest must be completed.
- ◇ Submit a one-page statement of purpose describing their interest and reasons for participating in the exchange program, the strength of their candidacy and what they hope to accomplish.
- ◇ Submit the complete application form and unofficial transcript.
- ◇ Submit *two* letters of recommendation from FACULTY (this does not include lecturers and teaching assistants) which specifically address the applicant's appropriateness for such an exchange program.
- ◇ Applicants selected for final consideration will be required to participate in a panel interview.
- ◇ Students are responsible for all travel and personal expenses.

REGISTRATION, HOUSING AND FINANCIAL AID

All registration, meals, housing and health insurance fees - if required - will be paid at the home college. If you attend Morehouse College you will be required to pay housing if there is not a reciprocal exchange.

- ◇ Financial Aid is available for those students who are eligible.
- ◇ Students are responsible for all travel and personal expenses.

FOR ADDITIONAL INFORMATION:

Contact:
Stephanie Muldrow, Exchange Program Coordinator
Thurgood Marshall Academic Advising
La Jolla, California 92093-0509
Phone: (858) 534-4110
E-mail: smuldrow@ucsd.edu



UCSD STUDENT EXCHANGE PROGRAM

RECOMMENDATION FORM

DEADLINE: FRIDAY, FEBRUARY 14, 2014

Name of Applicant: _____ Signature: _____
(Please print)

Name of Reference: _____ Signature: _____
(Please print)

TO BE COMPLETED BY THE APPLICANT

Applicants are advised that the Family educational rights and privacy act of 1974 accords them the right to review the recommendation unless that right is waived. While applicants are not required to make such a waiver, are further advised that some individuals may not be willing to supply a recommendation in its absence.

I have requested that this recommendation be completed by _____

In accordance with the FERP act, I hereby:

_____ Waive access to this faculty reference which should be considered confidential.

_____ I do not waive access to this faculty reference.

Applicant signature: _____ Date: _____

TO THE REFERENCE

It would be very helpful to the selection committee if you would provide an assessment of this applicant's academic abilities, special strengths and weaknesses, appropriateness for the exchange program and any other relevant information which would aid the committee in its evaluation process. Please use the reverse side of this form for your comments or attach additional sheets. Please return this form and your comments by the above deadline to:

**Thurgood Marshall Academic Advising
c/o Stephanie Muldrow
University of California, San Diego
La Jolla, CA 92093-0509**



UCSD STUDENT EXCHANGE PROGRAM

APPLICATION FORM

DEADLINE: FRIDAY, FEBRUARY 14, 2014

Name: _____

Student ID # _____ Term you prefer to attend: _____

Local address: _____

Permanent address: _____

Day phone #: _____ Evening phone: _____

Permanent phone #: _____ E-mail address: _____

Date of First enrollment at UCSD: _____ UCSD College: _____ Class level: _____

Major: _____ GPA in major: _____ Cumulative GPA: _____

Units completed: _____ Minor/2nd major _____ Expected date of Graduation: _____

LIST LOWER & UPPER DIVISION WORK COMPLETED IN YOUR MAJOR. LIST BY # AND TITLE

Course Number	Course Title	Course Number	Course Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

LIST TENTATIVE COURSES YOU WISH TO TAKE AT THE EXCHANGE COLLEGE:

Department	Course Number	Course Title
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PLEASE ATTACH A ONE-PAGE (TYPED, DOUBLE-SPACED) STATEMENT OF PURPOSE. DISCUSS YOUR REASONS AND MOTIVATIONS IN THIS EXCHANGE PROGRAM, WHAT YOU HOPE TO ACCOMPLISH THROUGH IT AND WHY YOU BELIEVE YOU ARE A STRONG CANDIDATE.

Each student submitting an application is responsible for understanding the terms of the Exchange Program.

Student Signature: _____ Date: _____

ACTION OF HOME INSTITUTION:		APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>
Copies: Host College			
Home College			
UCSD Registrar	Exchange Coordinator		Date: _____