

STUDY ABROAD INQUIRY FORM

Date:	
Name:	
RU ID Number:	
Grade Level: FR SO JR SR GR	
Anticipated Graduation Year:	
Major:	Minor:
Academic Advisor:	Academic Dean:
GPA:	
Cell Phone: _()	
RU Email:@mail.roosevelt.edu	
STUDY ABROAD PROGRAM INFORMATION	
When do you want to study abroad?	
Country or region you are interested in:	
Why are you interested in studying abroad, and what do you hope to gain from this experience? (Please write a few sentences on the back of this form)	
Foreign Language(s) Studied:	Number of years of study:
If you have not studied a foreign language, would you be interested in studying one? If so, which one?	

FUNDING

What methods of funding do you have available for study abroad? (Circle)

Federal Aid -- Self/Parental Support -- Private Scholarship -- State Aid -- RUScholarship

For further information please contact the Roosevelt University Office of International Programs, AUD 124 or email studyabroad@roosevelt.edu