INSTRUCTIONS FOR APPLICATION

1. The **APPLICATION** should be completed by the applicant and returned to the Spanish Department, LDC 340, Mailstop: 4-SPAN by **February 14, 2011**. Please use a word processor to complete this application.

2. The **LETTERS OF REFERENCE**, academic and language, should be given to (1) a faculty member who can assess your academic performance, motivation, and ability to work in a group, and (2) a language instructor, respectively. Leave the appropriate form with the faculty member willing to write for you and request that it be returned by the application deadline. It is the responsibility of each applicant to see that all materials are in place by the application deadline, February 11, 2011. Professor Brioso will not act on any file that is incomplete.

3. A **TRANSCRIPT** and **DEGREE AUDIT** of your Carleton work-to-date must be supplied with this application. Download your transcript and degree audit from the Hub.

4. Applicants for Carleton programs should know that the Family Educational Rights & Privacy Act prevents release of information which is professionally confidential to the Health Service or Counseling Center at Carleton but allows disclosure to faculty of information held in student files elsewhere within the College if it is determined to be of legitimate educational interest. Certain information from files in the office of the Dean of Students, for example, might be available if sought by faculty director. A student who may be concerned about any information that might affect consideration of his/her place in a Carleton program has the right to provide his/her own interpretation of that information and is urged to discuss these concerns directly with the faculty director.

5. A personal **INTERVIEW** will be scheduled with Professor Brioso. Eligibility criteria that will be considered during the selection process include faculty recommendations, satisfactory completion of academic prerequisites, GPA, proficiency in the use of Spanish, personal qualities (maturity, independence, adaptability, ability to contribute to and engage with the group, willingness to initiate intercultural opportunities, flexibility, ability to deal with stress, a sense of humor, physical stamina), and compliance with College policies.

6. Students will be informed in writing of decisions on their application.

7. Students admitted to the seminar will be expected to confirm their intention to participate by signature on a letter of agreement due no later than **Friday, April 1, 2011**. The health assessment form will be due no later than **Friday April 15, 2011**.

**NOTES:**

1. A **HEALTH FORM** is NOT required before admission to a Carleton off-campus program. On acceptance to a program, students will be asked to complete a health history to aid the faculty director in preparing an appropriate environment to deal with any current health problems and/or to help the director or others respond on your behalf should you become ill abroad.

2. Regarding **HEALTH INSURANCE**, Carleton makes the same requirement off-campus as on: that all students will carry insurance to cover them for the duration of their enrollment. If accepted into this program, you will be required to ascertain that your current insurance will cover you abroad and to take out additional coverage for the period of the seminar if it does not.

3. A student with a **DISABILITY** that may affect participation should discuss necessary accommodations as soon as possible with the Academic Accommodations Coordinator and the seminar faculty director.
APPLICATION
CARLETON SPANISH SEMINAR IN MADRID
Professor Jorge Brioso
Fall 2011

Please complete the following spaces by printing clearly:
Name ____________________________ Year of Graduation ______ M/F_______
Email address _________________________ Student ID number ____________________
Major (or intended major) ___________________________ Citizenship _______________

Please answer the following questions on a separate piece of paper, typed or word-processed. Be sure to number your answers to correspond with the numbers below:
1. Your name.
2. List by name and term other off-campus study program(s) you have gone on or intend to go on.
3. List the courses in which you are currently enrolled (put an "*" by the courses that will apply to your major).
4. List the courses you plan to enroll in before departure on this program (put an "*" by the courses that will apply to your major).
5. List the name and department of the Carleton faculty members who will complete your academic and language references (see enclosed).

Essay questions:
6. Describe any foreign travel experience you have had.
7. Describe your academic and personal goals for participating in the Madrid program.
8. What in your background and experience has helped prepare you to attain these goals?
9. The Carleton Madrid seminar is an immersion program—the use of Spanish is mandatory at all times throughout the duration of the program. What benefits do you see in having an immersion program? What course of action would you take with a student who speaks English outside of class?
10. Traveling with a group is different from traveling by yourself. Explain some of these differences using yourself as an example.

Endorsement by your faculty adviser and signature:
“We have discussed this off-campus studies program in the context of this student’s academic goals. This student can participate in this program and meet all graduation requirements within the usual 12 academic terms.”

Advisor’s signature ____________________________________________________________

Please print: Name ____________________________________________________________
Department __________________________________________ Phone ________________

For international students only
You must obtain the signature of the Associate Director of International/Intercultural Life in order to participate in a program of off-campus study.

Associate Director of OIIIL’s signature __________________________ Date ______________

Attach an unofficial transcript and degree audit, available on the Hub

Return your completed application to the Spanish Department, LDC 340, Mailstop: 4-SPAN no later than February 14, 2011.
To be completed by the applicant:

Applicant’s Name ________________________________

☐ I waive, or ☐ I do not waive my right of access to this reference form.

Applicant’s Signature: __________________________ Date __________

Name of Referee: Mr./Ms./Dr./Prof. ________________________________

1. Is your recommendation based primarily on (check all that apply):

☐ Coursework
☐ Some personal contact
☐ Significant personal contact

2. According to the following criteria, how would you rate the applicant?

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic ability</td>
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<td>Academic interest &amp; motivation</td>
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<td>Reliability/Integrity</td>
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<td>Level of maturity</td>
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<td>Adaptability and initiative in facing new situations</td>
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<td>Self-confidence &amp; self-esteem</td>
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<td>Relates well to others</td>
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<td>Emotional Stability</td>
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<td>Open-mindedness</td>
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<td>Ability to work independently</td>
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<td>Ambassador/good citizen qualities</td>
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</table>
3. What role can you imagine the student playing in a group?

4. Is there anything else you would like to note about the student?

5. If you were a faculty director of an off-campus study program, would you be:

   ☐ Eager    ☐ Willing    ☐ Cautious    ☐ Reluctant

   to have the applicant participate?

_______________________________________________    __________________
Signature                                                                 Date

_______________________________________________    __________________
Name (please print)                                             Phone

Please return this form to the Spanish Department Office, LDC 340, Mailstop: 4-SPAN no later than February 14, 2011.
LANGUAGE REFERENCE for __________________________ (student’s name)

I hereby waive my right of access to the information contained in this recommendation, thereby ensuring the confidential nature of your comments.

Student’s Signature ____________________________________________ Date __________________

Studying abroad requires emotional maturity, self-discipline, and a good amount of physical stamina. Participants must be able to adjust to different cultures, function as active members of a group, keep up with a rigorous schedule, and at the same time, maintain academic work of high quality.

DIRECTIONS: Please use this sheet to write your comments. This program is intensive and depends on the student’s motivation and flexibility. Please be as specific as possible in discussing the student’s language capabilities. If you find it helpful, you may also use the table below.

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<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
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<tbody>
<tr>
<td>Pronunciation</td>
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<td>Writing vocabulary</td>
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<td>Reading vocabulary</td>
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<tr>
<td>Grammar</td>
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</tbody>
</table>

Signature __________________________ Date __________________

Please Print ____________________________________________ Phone __________________

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