



Tri-County Technical College

LBC Early American Studies Application

Name (Last, First, Middle)		Preferred Name
Street Address	City, State	Zip Code
E-mail Address	Local Phone # ()	Student ID #
How long have you studied at Tri-County?	Major Area of Study	Cumulative GPA
Name of Emergency Contact	Home Phone ()	Work Phone ()
Street Address	City, State	Zip Code
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	U.S. Driver's License and State or Passport Number and Expiration Date <input type="checkbox"/> Do not have one yet	If you have a non-U.S. passport, which country is it from?
Where did you first hear about Learning Beyond Campus?		
Please name a Tri-County faculty member that would support your application to this program.		His or her e-mail address

If you have a disability and require special on-site accommodations, you are strongly encouraged to contact the Program Directors as soon as possible.

Please indicate all English and History classes that you have taken, instructor name(s) and grades earned in all classes taken at the university level.

Have you traveled to the New England area before? Where did you go? For how long were you there? Why did you go? Attach an extra sheet of paper if needed.

Explain why you would like to participate in this program. Include several examples of participation and challenges that you may encounter while in New England. Be specific. Attach an extra sheet of paper if needed.



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Describe a stressful situation in which you found yourself and how you handled it.

What are some of your future goals and aspirations? How will this program help you to reach them?

Thank you for answering these questions in detail.

Your signature verifies the following:

1. I have completed the necessary prerequisites for the course or have been given permission from the instructor to enroll in this course.
2. Study Programs require that applicants and participants are in good academic standing at Tri-County, and I authorize the Program Director(s) access to my academic and disciplinary records.
3. I will register myself, upon acceptance, in the appropriate course.
4. I authorize the Program Director(s) to bill my student account. I understand that all cancellations must be submitted in writing.
5. I understand that all program-travel fees (lab fees) and tuition are due by the Summer LBC term tuition deadline.
6. I understand that any pictures and quotes from the program may be used for future promotional materials of the program. I understand that if I do not want my pictures or quotes used, I will notify the Program Directors in writing.
7. I will complete the Medical Report, Assumption of Risk and Release form and the Code of Conduct before departure. I understand that I will not be able to travel with the program if I do not turn in these forms.
8. I understand that the Family Education Rights and Privacy Act of 1974 (FERPA), as amended, affords students the right to authorize the release of education information to third parties. I also understand that studying abroad may involve circumstances which require the institution to release certain information to third parties, but for which it may be difficult to obtain my prior written permission. For these reasons, I herewith authorize university officials to release my educational information to parties who, in their judgment, are acting in my interests as well. This authorization is valid from the time I submit this signed document through a period of one semester after my program abroad ends.

Signature of Applicant	Date of Signature
Signature of Parent, if applicant is under 18 years of age	Date of Signature

Submit this completed application to Alex Eaton on or before December 1 (Fall Applicants) or April 1 (Spring Applicants).

Tri-County Technical College does not discriminate in admission or employment on the basis of race, color, religion, sex, qualifying disability, veteran's status, age, or national origin.