



## SKIDMORE IN PARIS Application Instructions

**SKIDMORE COLLEGE**  
Off-Campus Study & Exchanges  
815 North Broadway  
Saratoga Springs, NY 12866  
Tel: 518-580-5355 Fax: 518-580-5359  
E-mail: [ocse@skidmore.edu](mailto:ocse@skidmore.edu)

### **Application Deadlines**

**October 15** - spring program

**March 15** - fall or academic year program

**Off-Campus Study & Exchanges (OCSE) recommends that you submit your application as early as possible during the semester prior to your desired term abroad.** OCSE is not responsible for students filing applications after the program deadline. You may be denied acceptance to the program if your application is late.

### **Eligibility Requirements**

Before you submit your application please be sure you are familiar with program eligibility requirements and Skidmore's off-campus study policies. You may find them online with OCSE at <http://cms.skidmore.edu/ocse/policies/index.cfm>.

You must also meet the requirements and program prerequisites established specifically for the Skidmore in Paris program. Visit the Skidmore in Paris Web site for details: <http://cms.skidmore.edu/ocse/programs/paris/requirements.cfm>.

### **Instructions (Incomplete applications will not be accepted.)**

- 1) **Declare your major.** *Skidmore students only.*
- 2) **Complete Skidmore in Paris application forms:**
  - Pages requiring Personal Information, Parent/Guardian Information, and signed statement.**
  - Responses to Applicant Background questions and essays on separate sheet of paper.**
  - Off-Campus Proposed Course of Study Form:** Attach corresponding course descriptions from <http://cms.skidmore.edu/ocse/programs/paris/courses/>.
  - Academic Recommendation(s):** We suggest you ask your academic advisor or another professor whose course you have recently taken to complete this recommendation. **NOTE:** Have both recommendation forms I and II completed by two different professors if you are not *currently* enrolled in a French course, or, if the last French course you took was completed earlier than last semester. The Academic Recommendation and Language Assessment forms must be completed by 2 (or three, if applicable) different professors.
  - Language Assessment:** Section III of this form should be completed by a French language instructor who is familiar with your *current capabilities* in the language. The Academic Recommendation and Language Assessment forms must be completed by 2 (or three, if applicable) different professors.
  - French Placement Exam:** All non-Skidmore students and Skidmore students *not currently enrolled in a French course* must take an online placement test: <http://cms.skidmore.edu/fil/requirements.cfm>. Non-Skidmore students should login according to the instructions online, and use the first 7 digits of their own college ID number. *Print your results screen* and attach to your application materials, and also *write your exam score* on Language Assessment form.
  - Study Abroad Program Approval Form:** *Non-Skidmore students only.* To be completed by your dean or director of international programs/study abroad.
  - Study Abroad Payment Agreement Form:** *Non-Skidmore students only.* Consult your home school's study abroad office if you have questions about completing this form.
  - Housing Questionnaire.**
  - Engagement Linguistique.**

(over)

❑ 3) **Attach all of the following materials:**

- **Course descriptions/syllabi.** Attach a course description or syllabus for each course included on your Proposed Course of Study form.
- **Transcript.** *This is for Non-Skidmore students only.*
- **Updated Degree Audit:** *This is for Skidmore students only.* Print from Office of the Registrar's Web site at <http://cms.skidmore.edu/registrar>. Degree audits MUST include major(s).
- **GPA or Non-Junior Petition Statement:** *(if applicable)* Applicants whose GPA is less than 3.0 or who will not be a college junior during the program must submit a petition with this application. For guidelines on the petition process, please see the OCSE Web site at <http://cms.skidmore.edu/ocse/policies/petition.cfm>. **NOTE:** Submission of a petition does not guarantee approval.
- **GPA or Non-Junior Letter(s) of Support:** *(if applicable)* Please see guidelines at the Web site referenced above to know if you must submit one or two letters of support with your petition.
- **ID Photos:** Nine (9) passport-size and quality photos should be submitted to OCSE with your application. Each photo must be cut to size and include the student's name on the back.
- **Photocopy of your passport:** This should be a clear, legible copy of the identification page of your passport that includes your photo. Your passport must be valid for at least six (6) months beyond your anticipated return date (i.e. 6 months after the program ends). If you do not yet have a passport, or if your passport will become invalid within six (6) months of the end of the program, please apply for one or renew immediately. Instructions for passport applications are included in this packet.
- **Application Fee:** Include payment of \$25.00 (checks and money orders must be made payable to "Skidmore College"). Please include your name on the check/money order and add "Skidmore in Paris – Application Fee" on the memo line. The fee is non-refundable and cannot be waived.

❑ 4) **Submit** your Skidmore in Paris application and supporting materials by official the deadline to Off-Campus Study & Exchanges, 202 Starbuck Center. If mailing application, send to:

Off-Campus Study & Exchanges  
c/o Skidmore in Paris  
Skidmore College  
815 N. Broadway  
Saratoga Springs, NY 12866

**Financial Aid:** Non-Skidmore students should check with the financial aid office at their home campus for information. All Skidmore College recipients of financial aid are eligible to use some or all of their aid on an approved program. You are urged to meet with a Financial Aid Representative to understand the implications based on your chosen program. This consultation should take place as soon as possible. If you are a highly aided student, we recommend that this consultation take place as early as possible to assist you in the program selection process.

**Further advice:** If you need further advice on the application process, please consult with a staff member in Off-Campus Study & Exchanges.

**NOTE:** Skidmore students accepted to this program are **REQUIRED to attend a MANDATORY pre-departure orientation** in order to participate in this program. Non-Skidmore students are encouraged to attend if attendance is feasible, but are not required to attend. In lieu of attending, non-Skidmore students will have a required telephone meeting to discuss relevant information with OCSE.

Pre-Departure Orientation for the **SPRING 2010** program:

**MONDAY, NOVEMBER 16, 2009**  
**5:30 – 8:30 PM**

***Mark your calendar now!***



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**Application Deadlines:** **October 15** - spring program  
**March 15** - fall or academic year program

**Desired term(s) of study:**  Academic Year  Fall  Spring 20\_\_\_\_\_

*Please TYPE or PRINT all information in **BLACK INK** only. Do NOT use pencil.*

### **PERSONAL INFORMATION**

Full Name: \_\_\_\_\_ Nickname (if applicable): \_\_\_\_\_

E-mail: \_\_\_\_\_ Alternate e-mail: \_\_\_\_\_

School Address: \_\_\_\_\_ Permanent Address: \_\_\_\_\_

\_\_\_\_\_

Campus Phone: (\_\_\_\_\_) \_\_\_\_\_ Permanent Address Phone: \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

OCSE will distribute my name, address, email address, and telephone number to other program participants. If I do not wish to have my information released I will check the box below.

I do not wish to have my name, address, email address and telephone number shared.

Date of Birth (MM/DD/YYYY): \_\_\_\_\_ Gender: \_\_\_\_\_

Are you currently living in on-campus housing?  Yes  No

Are you a New York state resident?  Yes  No

Country of Citizenship:  United States  Canada  Other \_\_\_\_\_

Non-resident alien — If non-resident alien, visa type \_\_\_\_\_  Lawful permanent resident

Passport Number: \_\_\_\_\_ Date of Issue: \_\_\_\_\_ Expiration: \_\_\_\_\_

### **ACADEMIC INFORMATION**

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

Major: \_\_\_\_\_ Second Major: \_\_\_\_\_

Minor: \_\_\_\_\_ GPA: \_\_\_\_\_

College ID#: \_\_\_\_\_

Current Class Level:  FY  SO  JR  SR Anticipated graduation date Month/Year: \_\_\_\_\_

## **PARENT/GUARDIAN INFORMATION**

Please provide contact information for the person(s) with whom we should communicate regarding your participation in the program. This (These) person(s) will serve as our contact for financial issues as well as in cases of emergency.

1.) Name: \_\_\_\_\_

2.) Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
(city) (state) (zip)

\_\_\_\_\_  
(city) (state) (zip)

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

Dear Student:

By signing your name below, you permit Skidmore College's Off-Campus Study & Exchanges to release information to the contacts you have listed above. This information will include, but is not limited to, pre-departure information regarding the program, billing statements and other financial information, and information regarding your whereabouts while you are abroad.

If you choose not to sign below, we will NOT be allowed to release any type of information to your guardian/parent while you are abroad, **except in the case of an emergency.**

I, \_\_\_\_\_ permit Skidmore College's Off-Campus Study & Exchanges to release information to the contacts I have indicated above.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

## **SPECIAL NEEDS OR CIRCUMSTANCES**

If you have a physical condition for which accessible, on-campus housing or classroom accommodation might be needed; a documented disability which may require academic accommodation (e.g., note takers, taped texts); a medical condition which might require immediate attention while abroad; or a condition which might affect emotional or mental well-being while abroad, you are encouraged to identify your needs by **attaching a separate page** indicating the nature and extent of your circumstances and arrangements which are currently being made for you on this campus. OCSE does not discriminate on the basis of special needs. Rather, your disclosure at this stage of the application process is invited in order to assist you in identifying a program site that can provide reasonable accommodation of your needs. Following acceptance it is your responsibility to consult with OCSE to determine the deadlines by which you must submit written, current, and professionally documented information.

## **RELEASE OF INFORMATION**

The collection, retention, and dissemination of your records and information about you are subject to federal regulation under the Family Education Rights and Privacy Act (FERPA) of 1974. You are responsible for specifying the persons or agents who have access to your records. Therefore, it is necessary that we obtain your permission to request and release information pertinent to your exchange. Please read the following statements and sign below:

By signing your name below, you authorize Skidmore College's Off-Campus Study & Exchanges to have access to information regarding your academic, social, and financial standing. You also authorize Skidmore's Off-Campus Study & Exchanges to share any pertinent information with program providers, directors and staff overseas as needed. The

existence of a disciplinary record does not preclude admission, but will be considered in the overall evaluation of the application.

Studying abroad is a privilege that is available to students who have demonstrated the ability to adjust academically and emotionally to college, and who are ready to benefit from the challenges of off-campus study. Only students in good academic, social, and financial standing are eligible to study abroad. I further understand that submitting an application is not a guarantee of application acceptance. Failure to maintain (prior to and during the exchange) all of the eligibility requirements of the program and those of Skidmore College will result in cancellation of participation. Failure to pay all financial obligations to Skidmore College will also result in cancellation of participation. I also understand that until financial obligations are met, Skidmore College and the host program will not report grades or release transcripts; and I will not be permitted to re-enroll at, or graduate from, Skidmore College.

I have read and fully understand Skidmore's information on eligibility, policy, and procedures presented on the OCSE Web site.

Please be aware that the stress of travel and adjusting to a new culture can exacerbate physical or psychological conditions that may be under control at home. Physical or psychological disorders can become serious under the stresses of a new environment. Therefore, if you have a physical or psychological condition it is important that you meet with your physician or counselor to discuss how studying off campus could affect your medical condition. Addressing your health issues prior to studying off campus will help you to identify those resources that will and will not be available at your program site.

If accepted for participation in a study abroad program, I agree to adhere to all the rules and regulations of both Skidmore College and the host program. Failure to do so may result in the cancellation of my exchange.

I affirm that all information is complete, accurate, and true to the best of my knowledge. I acknowledge that I am signing freely, voluntarily, and under no compulsion.

***I, \_\_\_\_\_, have read and understand the above statements.***  
(please print name)

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date



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### APPLICANT BACKGROUND QUESTIONS

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Please answer the following questions on a **separate sheet of paper**. Be sure to include your name, the program name and semester for which you are applying. Please number your responses accordingly and answer in complete sentences.

1. List all the courses not on your transcript that you will have completed before the beginning of the program (such as your current enrollment and/or upcoming summer courses).
2. At what level was your last course in French, and when and where was it taken? Please include the grade achieved.
3. What additional academic work (outside of a formal class) have you done, if any, that would serve as background for this program?
4. What subjects are you most interested to pursue while on the program? How will courses in these subjects assist you in completing your graduation requirements?
5. If you ever traveled or lived outside of the United States, please describe your experience and how you will incorporate it into your preparations for your experience in Paris. If you have not previously traveled outside of the United States, explain how you plan to prepare for your international experience.
6. Do you have any special needs about which we should be informed? **Please note:** This information will be kept confidential and is NOT considered as part of the selection process. By informing us of special needs now, you will allow us to make arrangements that will best serve as a participant on this program and ensure that we can identify necessary the resources in advance.
  - ✓ Are you currently under medical treatment for any reason?
  - ✓ Are you currently being treated by a psychologist/physician for an emotional, nervous or mental condition?
  - ✓ Do you have any physical or learning disabilities for which you will need special arrangements?

### ESSAY QUESTIONS

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On a **separate sheet of paper**, please answer the following questions in essay format. Responses should each be between 400-600 words.

1. **PLEASE RESPOND TO THIS QUESTION IN FRENCH.**  
Why do you want to participate in the Skidmore in Paris program? How will this program assist you in achieving your academic objectives and personal goals?
2. **RESPONSES TO THIS QUESTION MAY BE IN ENGLISH OR FRENCH.**  
How do you plan to incorporate the experience and knowledge you gain while abroad into your studies at your home institution?

Name: \_\_\_\_\_

Term Abroad:  Acad. Yr  Fall  Spring 20\_\_\_\_

**PROPOSED COURSE OF STUDY FORM**

- ✓ Fill in the left column with courses you hope to take while in Paris. **Please note that course availability in Paris may be limited, so be sure to include alternate course selections where applicable.**
- ✓ **SKIDMORE STUDENTS:** If you hope to receive credit toward your major or minor, please have your **department Chair review the course description** and complete the section entitled "To be completed by Department Chair." If you want a course to count toward another graduation requirement, please have the Chair of the corresponding department review the course description and complete the section entitled "To be completed by Department Chair." ALL foreign language courses undertaken abroad will need approval from the Chair of the Department of Foreign Languages & Literatures.
- NON-SKIDMORE STUDENTS:** Please be sure to discuss the course approval process on your home campus with your study abroad office and/or your academic advisor.
- ✓ **Skidmore students MUST attach a course description for each course to obtain credit approvals.** Course information can be found online at <http://cms.skidmore.edu/ocse/programs/paris/courses/index.cfm>.
- ✓ Discuss your course preferences with your faculty advisor. **Be sure that you understand how your course selection affects your progress toward graduation.** Obtain your advisor's signature.
- ✓ Remember you must enroll in a full course of study (generally **14-17 credits**; no more than 18 credits.)

TO BE COMPLETED BY STUDENT		TO BE COMPLETED BY DEPARTMENT CHAIR if credit is sought for any graduation requirement.	
Course title and number	Credits	Skidmore degree requirement fulfilled	Chair's Signature
JPFF261* Grammar and Written French OR	4 -----		
JPFF361* Adv. Grammar and Comp. I	3		
JPFF/FL323* France: Past and Present	4		
JPFF308* Paris in Action	1		
<b>Total Credits</b>			

\* Required course. Enrollment in JPFF261 and JPFF361 is determined by a placement test taken in Paris. JPFF308 will be assessed as S/U.

**To be completed by applicant's faculty advisor in major department:**

Please check the appropriate boxes:

- I am familiar with the applicant's academic progress and believe that his or her training and intellectual interests are such as to qualify the student to benefit by participating in this study abroad program.
- I recommend the applicant with respect to character and maturity for admission to this study abroad program.

Comments: \_\_\_\_\_

\_\_\_\_\_  
Advisor's Signature

\_\_\_\_\_  
Date





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**ACADEMIC RECOMMENDATION FORM (I)**

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**I. TO BE COMPLETED BY THE APPLICANT**

Applicant Name: \_\_\_\_\_ Class Year: \_\_\_\_\_

Term Abroad: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Evaluator Name: \_\_\_\_\_

Course(s) taken with Evaluator: \_\_\_\_\_

**II. TO BE COMPLETED BY FACULTY**

For how long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

In which course(s) have you taught this student? \_\_\_\_\_

How would you feel if this applicant were to be a member of a study abroad group for which you were the director?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Using a **separate sheet of paper**, please comment on the applicant's general intellectual ability and motivation for studying abroad. Please include references to his/her emotional maturity and stability, ability to function in a foreign environment, ability to relate to others, and ability to work independently.

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Name of Evaluator (please print): \_\_\_\_\_

Title: \_\_\_\_\_ Institution: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN TO OFF-CAMPUS STUDY & EXCHANGES AT SKIDMORE COLLEGE BY**  
October 15: Spring program  
March 15: Academic Year/Fall Semester program





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**ACADEMIC RECOMMENDATION FORM (II)**

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**I. TO BE COMPLETED BY THE APPLICANT**

Applicant Name: \_\_\_\_\_ Class Year: \_\_\_\_\_

Term Abroad: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Evaluator Name: \_\_\_\_\_

Course(s) taken with Evaluator: \_\_\_\_\_

**II. TO BE COMPLETED BY FACULTY**

For how long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

In which course(s) have you taught this student? \_\_\_\_\_

How would you feel if this applicant were to be a member of a study abroad group for which you were the director?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Using a **separate sheet of paper**, please comment on the applicant's general intellectual ability and motivation for studying abroad. Please include references to his/her emotional maturity and stability, ability to function in a foreign environment, ability to relate to others, and ability to work independently.

---

Name of Evaluator (please print): \_\_\_\_\_

Title: \_\_\_\_\_ Institution: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN TO OFF-CAMPUS STUDY & EXCHANGES AT SKIDMORE COLLEGE BY**  
**October 15: Spring program**  
**March 15: Academic Year/Fall Semester program**





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**LANGUAGE ASSESSMENT FORM**

**I. TO BE COMPLETED BY THE APPLICANT**

Applicant Name: \_\_\_\_\_ Class Year: \_\_\_\_\_

Term Abroad: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Evaluator Name: \_\_\_\_\_

Course(s) taken with Evaluator: \_\_\_\_\_

**II. TO BE COMPLETED BY ALL APPLICANTS NOT CURRENTLY ENROLLED IN A FRENCH COURSE AT SKIDMORE COLLEGE**

Write in exam score below and attach printed test results screen. Please complete the Skidmore College Online Placement Exam (WebCAPE) at <http://www.skidmore.edu/academics/fll/webcape.html>. (Skidmore students who complete this section do not complete section III.)

Placement Test Exam Score: \_\_\_\_\_

**III. TO BE COMPLETED BY CURRENT OR RECENT FRENCH COURSE INSTRUCTOR**

For how long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

In which course(s) have you taught this student? \_\_\_\_\_

How would you feel if this applicant were to be a member of a study abroad group for which you were the director?

\_\_\_\_\_  
\_\_\_\_\_

Using a **separate sheet of paper**, please comment on the applicant's general intellectual ability and motivation for studying abroad. Please include references to his/her emotional maturity and stability, ability to function in a foreign environment, ability to relate to others, and ability to work independently.

**GENERAL LANGUAGE PROFICIENCY ASSESSMENT**

	Upper 10%	Next 15%	Mid 50%	Lower 25%	Unable to Judge
<b>Overall Knowledge of French</b>					
<b>Listening Comprehension</b>					
<b>Fluency</b>					
<b>Reading Comprehension</b>					
<b>Written Expression</b>					

Name of Evaluator (please print): \_\_\_\_\_

Title: \_\_\_\_\_ Institution: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN TO OFF-CAMPUS STUDY & EXCHANGES AT SKIDMORE COLLEGE BY**  
October 15: **Spring program**  
March 15: **Academic Year/Fall Semester program**





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## STUDY ABROAD APPROVAL FORM

### FOR NON-SKIDMORE STUDENTS ONLY

#### I. TO BE COMPLETED BY THE APPLICANT

Applicant Name: \_\_\_\_\_ Class Year: \_\_\_\_\_

Term Abroad:  Academic Year  Fall  Spring 20\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Home Institution: \_\_\_\_\_

#### II. TO BE COMPLETED BY DIRECTOR OF STUDY ABROAD AT HOME INSTITUTION

Please check all that apply:

- The applicant is in good academic and social standing at his/her home institution.
- I recommend the applicant with respect to scholarship, character, and personality for admission to the Skidmore in Paris program.
- I have reviewed and approve the applicant's plan of study and consider the work creditable toward his/her degree.
- I will consider the work for credit upon the student's successful completion of the program and return to the home institution.

Comments or concerns regarding the applicant:

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Please indicate name and address to which **official transcript** should be mailed:

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Name (please print): \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please complete the Payment Agreement Form on the reverse side.**



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## **STUDY ABROAD PAYMENT AGREEMENT FORM** **FOR NON-SKIDMORE STUDENTS ONLY**

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Applicant Name: \_\_\_\_\_ Class Year: \_\_\_\_\_

Term Abroad:  Academic Year  Fall  Spring 20\_\_\_\_\_

Home Institution: \_\_\_\_\_

Please indicate to whom **program invoice** should be sent:

Student

*I understand that once I confirm my participation in the program, that I will be responsible for payment of the program fee and will make payment as stipulated on the invoice from Skidmore College.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Home institution (Please indicate name and address to which the invoice should be directed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The person signing below is authorized to assume financial responsibility on behalf of the home institution and agrees to assume liability for the costs of the program referenced above:

Name (please print): \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN TO THE SKIDMORE COLLEGE OFFICE OF OFF-CAMPUS STUDY & EXCHANGES BY:**  
**October 15: Spring program**  
**March 15: Academic Year/Fall Semester program**



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## HOUSING QUESTIONNAIRE FORM

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The following questionnaire will be used by the Paris staff to match you with a compatible French host family. It is to your advantage to be as SPECIFIC and HONEST as possible. All information is treated with the utmost discretion and is seen only by OCSE, the Skidmore in Paris resident staff. **PLEASE PRINT CLEARLY.**

Student name: \_\_\_\_\_ Term Abroad: \_\_\_\_\_  
Last, First, Middle

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
DD/MM/YYYY City, State/Province, Country

Passport Number: \_\_\_\_\_ Issuing State & Country: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
DD/MM/YYYY

E-mail Address: \_\_\_\_\_

Father's full name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
DD/MM/YYYY

Father's profession (past or present): \_\_\_\_\_

Mother's full name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
DD/MM/YYYY

Include maiden name (if applicable): \_\_\_\_\_

Mother's profession (past or present): \_\_\_\_\_

If you have siblings: Names and Ages of brothers: \_\_\_\_\_

sisters: \_\_\_\_\_

Please check if parents are:  separated  divorced  deceased

If one of the above is checked, with whom do you make your permanent home, and since when?

Mother  Father  Other: \_\_\_\_\_ Since (year): \_\_\_\_\_

Please mention, if you wish, any special family circumstances (for example, a recent death of a close relative, etc.):

\_\_\_\_\_  
 \_\_\_\_\_

### PARENT/GUARDIAN CONTACT INFORMATION:

Father's Address: \_\_\_\_\_  
House/Apt # and Street City, State/Province, Country

Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
Daytime Evening

Email: \_\_\_\_\_

Name: \_\_\_\_\_

**Skidmore in Paris -** \_\_\_\_\_

Term Abroad

Mother's Address: \_\_\_\_\_

House/Apt # and Street

City, State/Province, Country

Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

Daytime

( \_\_\_\_\_ ) \_\_\_\_\_

Evening

Email: \_\_\_\_\_

What kind of relationship do you have with your family? \_\_\_\_\_

What types of activities do you do together as a family? \_\_\_\_\_

Do you generally eat meals together when you are home?  Yes  No

Would you like/dislike having a similar relationship with your host family? Why/why not? \_\_\_\_\_

Please describe the relationship you had with your First-Year roommate. Was it a positive/negative experience?:

Could something have been done differently to improve the situation, if it was a negative one? \_\_\_\_\_

Do you have any pet peeves? If so, what are they? \_\_\_\_\_

Are you a "morning person", a "night person", or neither? Please explain: \_\_\_\_\_

Do you like spending time with new people?  Yes  No  Depends on situation (explain below)

Do you need to be alone and/or have down-time?  Yes  No  Depends on situation (explain below)

Do you *generally* have any problems sleeping?  Yes  No

Name: \_\_\_\_\_

**Skidmore in Paris -** \_\_\_\_\_

Term Abroad

Do you tend to be neat and organized with your belongings or are you unorganized and messy?

How do you judge yourself to be?     Extroverted     Introverted

Why? \_\_\_\_\_

Do you currently live in a:     dorm     apartment?    Is your current room a:     single     double?

Have you ever lived in a big city?     Yes     No    If Yes, when and where? \_\_\_\_\_

How do you feel about living in a big city? \_\_\_\_\_

How do you feel about taking public transportation? \_\_\_\_\_

Have you traveled or lived outside of the United States?     Yes     No

Have you previously been to France?     Yes     No

If Yes, please describe briefly where, how long, if as a tourist, student, etc.: \_\_\_\_\_

Since when have you studied French, if at all? \_\_\_\_\_

What do you consider to be your speaking ability in French?     Beginner     Intermediate     Advanced

What do you consider to be your comprehension ability in French?     Beginner     Intermediate     Advanced

How do you spend your free time at school? \_\_\_\_\_

How do you usually spend your vacations/summers? \_\_\_\_\_

What sports/physical activities do you regularly practice at school or at home? \_\_\_\_\_

What is the most important aspect of a study abroad experience in Paris for you? \_\_\_\_\_

What is your motivation for attending the Paris program? \_\_\_\_\_

Name: \_\_\_\_\_

Skidmore in Paris - \_\_\_\_\_

Term Abroad

Living with the French allows students to discover and appreciate a different culture as well as improving language abilities through daily contact with all family members. A variety of housing situations is available in which students will always have a single room. In all cases the parent has had experience with children of their own. Please place the following situations in your order of preference, numbering 1-4:

\_\_\_\_\_ COUPLE WITH CHILD(REN)

\_\_\_\_\_ SINGLE WOMAN WITH CHILD(REN)

\_\_\_\_\_ COUPLE WITHOUT CHILD(REN)

\_\_\_\_\_ SINGLE WOMAN WITHOUT CHILD(REN)

Various relationships with your hosts are possible, depending on their expectations and yours, please explain what kind of relationship you would like to have and why: \_\_\_\_\_

\_\_\_\_\_

In the case of a family with children, what age children would you enjoy living with? Why? \_\_\_\_\_

\_\_\_\_\_

What age children would you **NOT** enjoy living with? Why? \_\_\_\_\_

\_\_\_\_\_

Would you object to being placed with a family that has a French or foreign student already in residence, both of you in separate rooms?  Yes  No If Yes, why? \_\_\_\_\_

\_\_\_\_\_

Would you be able to live with a dog(s)?  Yes  No Cats?  Yes  No

Please explain if you have any objection to living with pets? \_\_\_\_\_

\_\_\_\_\_

Do you smoke?  Yes  No If Yes, could you restrict your smoking to OUTSIDE the residence?  Yes  No

Would you object to your host smoking (indoors) regularly?  Yes  No Occasionally?  Yes  No

If you practice a religion, which one? \_\_\_\_\_

Do you have any special dietary requirements?  Yes  No If Yes, please explain. *(Please note that vegetarians / non-meat eaters may have a more limited dietary selection)* \_\_\_\_\_

\_\_\_\_\_

Are you a "picky" eater?  Yes  No If Yes, please explain. \_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_

**Skidmore in Paris -** \_\_\_\_\_

Term Abroad

Please explain if you have any food or medical allergies of which we should be aware? \_\_\_\_\_

\_\_\_\_\_

If they are available, students will have single bedrooms. Most bedrooms are within the apartment but some are historically a former "maid's room" (generally on the top floor in the same building as your host; possibility with separate entrances; sink with hot/cold water; WC in the hallway shared with others; shower usually down in host's apt; total and desired access to the host's apartment). Would you object to a maid's room?  Yes  No

If Yes, why? \_\_\_\_\_

\_\_\_\_\_

**Everyone** will have an average traveling time of **20-25 minutes** by Métro to classes. Would you object to living a bit farther away (30-40 minute Métro) if the family is more suited to your needs?  Yes  No

If Yes, why? \_\_\_\_\_

\_\_\_\_\_

It is usually not possible to place students according to all their preferences. Please number the following aspects in order of their priority, 1-6:

\_\_\_\_\_ family composition

\_\_\_\_\_ religious preference

\_\_\_\_\_ location in relation to classes

\_\_\_\_\_ spacious housing arrangements

\_\_\_\_\_ diet restrictions

\_\_\_\_\_ smoking or pet restrictions

Please add any other details that may help in placing you in a family, if applicable. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact details during semester break (for spring program) or during summer (for fall/academic year program):

\_\_\_\_\_

House/Apt # and Street

\_\_\_\_\_

City, State/Province, Country

\_\_\_\_\_

Telephone (include country code, if applicable)





## SKIDMORE IN PARIS Application

**SKIDMORE COLLEGE**

Off-Campus Study &amp; Exchanges

815 North Broadway

Saratoga Springs, NY 12866

Tel: 518-580-5355 Fax: 518 580-5359

Email: ocse@skidmore.edu

### ENGAGEMENT LINGUISTIQUE

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En acceptant de participer au Programme de Skidmore à Paris, j'accepte entièrement et complètement les règles linguistiques de Paris. Je promets de parler uniquement français au Centre et pendant toutes les activités organisées par le Programme.

Je comprends que mon engagement à pour but de maximiser mon apprentissage linguistiques et mon intégration dans la culture française.

Je comprends que parler anglais au Centre ne favorise pas mon perfectionnement linguistique ni celui des autres étudiants du Programme.

Tout comportement contraire à cet engagement personnel dévalorise l'esprit du programme et ne justifie plus ma présence à Paris.

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Nom de l'étudiant/e (en majuscule)

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Signature de l'étudiant/e

---

Date



**SKIDMORE COLLEGE  
OFFICE OF RESIDENTIAL LIFE  
HOUSING PREFERENCE FORM**

Name \_\_\_\_\_ Class \_\_\_\_\_ Date \_\_\_\_\_

Leave Location \_\_\_\_\_

Cell Phone and Skidmore Email Address \_\_\_\_\_

Home Address \_\_\_\_\_

I am returning \_\_\_\_\_  
Semester Year

**PLEASE NOTE: To be eligible to participate in the room selection process (this includes the Off Campus Drawing), you must pay your Returning Student Deposit.**

I prefer (list at least 3 residence hall choices):

\_\_\_\_\_ Single \_\_\_\_\_ Double

Residence Halls \_\_\_\_\_

\_\_\_\_\_ Apartments \_\_\_\_\_

\_\_\_\_\_ Off Campus (Off campus living is available for a limited number of students.)

I am a smoker \_\_\_\_\_ Yes \_\_\_\_\_ No

I prefer: \_\_\_\_\_ Women's Floor \_\_\_\_\_ Gender Neutral

Fall returners, please complete the following to aid us in room selection for the next academic year:

\_\_\_\_\_ I have arranged for a friend to draw for me \_\_\_\_\_  
Name

\_\_\_\_\_ I would like Residential Life to draw for me.

All residence halls (not apartments) are substance free. All residence halls and apartments are smoke free.

If we are unable to house you in a single room, you will be placed in a double room. Please list any information which should be considered in this placement.

\_\_\_\_\_

Residential Life will attempt to house you in one of the residence halls you have indicated. However, it cannot be guaranteed that your preference will be accommodated.

This form must be returned to the Office of Residential Life when your leave is approved.





## **OFF-CAMPUS STUDY & EXCHANGES** **HOW TO OBTAIN A U.S. PASSPORT**

All students studying abroad must have a passport in order to travel to their overseas destination. In addition, those of you who need visas will need a passport before you can apply for a visa. **If you do not have a passport, apply for one immediately.** If your current passport **expires within 6 months** from the end of your program, you must **renew your passport right away.**

### **FIRST-TIME APPLICATIONS**

Passport applications are available at most U.S. Post Offices, although the applications are processed through the U.S. Department of State. Please contact your local Post Office to see if it is a passport agent. Instructions for first-time applicants are available online at [http://travel.state.gov/passport/passport\\_1738.html](http://travel.state.gov/passport/passport_1738.html). You can also find a link to an application at [http://travel.state.gov/passport/get\\_first\\_apply.html](http://travel.state.gov/passport/get_first_apply.html).

If you are applying for a passport for the first time, you will need:

1. Passport application (Skidmore students can go to the Washington Street Post Office or the Office of Off-Campus Study & Exchanges for applications, or download an application from the Internet.)
2. Original (raised seal) birth certificate or other proof of citizenship.
3. Two (2) identical passport photos (must be official passport photos – no hats or headgear – confirm information online regarding digitized photo requirements.)
4. Photo ID (driver's license) with issue date, expiration date, and ID number.
5. Checks for passport fees (Confirm with Post Office or web for exact amounts.)

### **TO RENEW A U.S. PASSPORT**

Passports can be renewed by mail. Instructions for renewing a U.S. passport are available online at [http://travel.state.gov/passport/passport\\_1738.html](http://travel.state.gov/passport/passport_1738.html). Applications are available at most U.S. Post Offices or you can find a link to an application online at [http://travel.state.gov/passport/get/renew/renew\\_833.html](http://travel.state.gov/passport/get/renew/renew_833.html).

To renew your passport, you will need:

1. A "Passport Renewal Form" from a passport agency. (Skidmore students can go to the Washington Street Post Office or the Office of Off-Campus Study & Exchanges for applications for applications or download an application from the web.)
2. Two (2) identical passport photos (must be official passport photos, no hats or headgear– confirm information online regarding digitized photo requirements.)
3. Your old passport.
4. Checks for passport fees (Confirm with Post Office or the web for exact amounts.)

Send in your old passport, payment, new passport photos, and completed application form. Confirm with the issuing agent to ensure you are following all necessary instructions. Mailing instructions can be found on the web.

**NOTE:** The processing time for US passports is approximately six (6) weeks for standard processing. It is a good practice to confirm estimated processing times for new or renewal applications before you apply. Confirm processing times online at [http://www.travel.state.gov/passport/get/processing/processing\\_1740.html](http://www.travel.state.gov/passport/get/processing/processing_1740.html). It is also important that you apply right away, especially if you will need to apply for a visa for the country to which you wish to study abroad. If you need a passport more quickly, you can pay an extra fee to expedite the process. Please confirm with the passport issuing agent regarding exact fees.