

THE GEORGETOWN COLLEGE SUMMER EXPERIENCE APPLICATION

JULY 6-17, 2020

An opportunity for you to experience college life in the U.S. first-hand, and spend a week in the lovely bluegrass region.

STUDENT INFORMAT	TION —	
Name		Birth Date
Campus Phone Numb	per	Email:
Passport Number:		
High School Year: Sec	condary 4 Secondary 5	5 Secondary 6 Age (15-18)
Years of English study	: T-Shirt Size	ze (circle): S M L XL
EMERGENCY CONTA	CT INFORMATION ————	
Name:		Relationship to you
Email		Phone
Name:		Relationship to you
Email		Phone
IMPORTANT DATES		
	Applications due	e 4/24
	Acceptance notification	n 5/1
	First Payment (\$1175) due	e 5/15
	Final Payment (\$1175) due	e 6/12

	PLEASE WRITE A PARAGRAPH, IN ENGLISH, DI	ESCRIBING WHY YOU WANT TO GO ON THIS TRIP.	
		am Director as part of your application process.	
Plea	ase submit your completed application to Dr. La	ura Hunt via email: laura_hunt@georgetowncollege.ed	ıb
	GEO	DRGETOWN L L E G E	