**SPPA SEOUL, REPUBLIC of KOREA GRADUATE STUDY ABROAD APPLICATION**

**“SEOUL CASE STUDY PROGRAM,” OCTOBER 18-27, 2019**

**2019 – 2020 ACADEMIC YEAR TRIP**

**(Please *type or print*****clearly)**

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**LOCAL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CELL/LOCAL PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_WORK PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DEGREE PROGRAM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EXPECTED DATE OF GRADUATION \_\_\_\_\_\_\_\_\_\_\_\_ ADVISOR NAME­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WHAT IS YOUR AREA OF CONCENTRATION? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WHAT ARE YOUR PRIMARY PROFESSIONAL INTERESTS FOLLOWING GRADUATION?**

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**CITIZEN OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Please discuss how you think this travel experience will enhance your academic program and career goals.

2. Have you participated in a previous SPPA study abroad program? \_\_\_\_\_\_ If yes, when and where?

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3. How might your participation in this study trip benefit other members of the study group?

**4. Please attach a brief biographic sketch (*not more than one page: additional pages will not be read*) that includes personal, academic and professional experience to-date.**

**5. If you have a work assignment during Fall 2019**, you will need to document your supervisor’s consent in advance, using either the SPPA Assistantship Supervisor Approval Form or another process and form used by your employer, and submit it to Dr. Justice by Tuesday, September 3, 2019.

**6. APPLICATION DEADLINE:**

**May 6, 2019 – APPLICATION DUE:** All completed application forms must be in one of Professor Justice’s mailboxes **(hard copy** to 183 Graham Hall, **or a single scanned PDF file containing program and scholarship applications** to justice@udel.edu) by the end of the day on Monday, May 6, 2019.

**7. IF YOU ARE ACCEPTED:**

*In order to participate in the program, you must sign and return the* ***Participation Agreement Form*** *along with a deposit/program fee check in the amount of $250, payable to University of Delaware,* ***by 4:00 PM on Tuesday, September 3, 2019*.** The Participation Agreement Form will be available on the Biden School ([www.bidenschool.udel.edu](http://www.bidenschool.udel.edu)) and/or SCSP (<https://goo.gl/FprhNh>) websites.

Thank you for your interest in the SPPA October 2019 Seoul, Republic of Korea Graduate Study Abroad Program.

SPPA STUDY ABROAD PROGRAM SCHOLARSHIP ASSISTANCE APPLICATION 2019 – 2020 ACADEMIC YEAR TRIPS

(Please type or *print* clearly)

NAME E-MAIL

CELL/LOCAL PHONE WORK PHONE

YOUR SPPA DEGREE PROGRAM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HAVE YOU RECEIVED FUNDING FOR A PREVIOUS SPPA STUDY ABROAD PROGRAM?

Y N

IF YES, WHEN AND WHAT TRIP?

SPPA 2019-2020 STUDY ABROAD PROGRAMS FOR WHICH YOUARE APPLYING FOR SCHOLARSHIP ASSISTANCE:

 FALL 2019 SEOUL;

 OTHER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_.

PLEASE NOTE: SPPA scholarship assistance is ordinarily limited to 1 program per degree matriculation. If you are accepted to participate in more than one program, you must notify the faculty program directors and the SPPA office which program you wish to receive funding for.

Receipt of a scholarship award also requires: (1) matriculation in a SPPA graduate degree program; (2) successful completion of 9 credit hours within the degree program in good academic standing (This requirement may be waived for first-semester students applying for the October 2019 Seoul Case Study program. If you are applying for assistance for the October 2019 Seoul Case Study Program and have received prior scholarship assistance, please speak with the faculty program director.); and (3) adherence to all travel requirements as outlined in the SPPA INTERNATIONAL STUDY ABROAD GRADUATE STUDENT SCHOLARSHIP GUIDELINES 2019-2020.

My signature below indicates that I understand the conditions and restrictions described above

PRINT NAME SIGNATURE DATE

***DELIVER THIS FORM WITH YOUR TRIP APPLICATION BY THE DEADLINE LISTED ON THE TRIP APPLICATION.***

SPPA INTERNATIONAL STUDY ABROAD

GRADUATE STUDENT SCHOLARSHIP GUIDELINES

2019-2020

1. Students must be matriculated in a SPPA graduate degree program, be in good standing academically, and, by the time of the trip, have completed a minimum of 9 credit hours toward their graduate degree (exceptions will be considered, for entering students applying for the Fall 2016 Seoul trip). Students must also complete any scholarship application and submit it on time and as directed.

2. The actual amount of scholarship support awarded to eligible students will depend on the available funds, the total number of eligible students and the total cost of each trip. Typically, the amount of a scholarship covers approximately 50% of the allowable cost of a trip, and sometime more.

3. All expenses must be documented (using paper receipts) and must adhere to University and SPPA guidelines. No personal expenses (such as laundry, alcohol, telephone calls, upgrades, change fees, optional excursions, admission fees, etc.) may be included. All students receiving scholarship assistance must adhere to University of Delaware guidelines concerning travel and entertainment purchases.

4. Students who fail to provide the waiver form, contact and emergency forms and provide any other required information will have their scholarship assistance revoked and will be unable to travel. Additionally, they will need to repay all expenditures made on their behalf.

5. Students are required to register in the travel database, register for SOS assistance services, and purchase GeoBlue health insurance arranged through the Institute of Global Studies, using the web links and instructions provided for those purposes. Students who fail to register with IGS and SOS, or purchase the required HTH insurance will have their scholarship assistance revoked and/or be unable to travel. Additionally, they will need to repay any expenditure made on their behalf.

6. Students will be required to sign a scholarship assistance agreement detailing the conditions, covered items and funding amount along with penalties for failing to adhere to deadlines and regulations.

7. Any student who becomes academically ineligible to travel prior to departure but after expenditures have been made on his/her behalf, will be responsible for repayment of all those funds unless the faculty trip leader/s or program coordinator are able to find a suitable replacement person. The student will be responsible for any costs related to these changes in excess of $100.

8. Any student who leaves the study abroad program early without the knowledge and consent of the faculty trip leader/s may forfeit his/her scholarship assistance and be required to repay any funds already expended on his/her behalf by SPPA.

9. All students will be required to make an appointment with Diana Simmons upon their return to reconcile their expenses. Details about deadlines will be communicated in the final meeting before departure.

SPPA INTERNATIONAL STUDY ABROAD APPLICATION ADDENDUM ASSISTANTSHIP/WORK ASSIGNMENT SUPERVISOR CONSENT FORM 2018-2020 ACADEMIC YEAR TRIPS

Any student with an assistantship/work assignment must document her/his supervisor's awareness of and consent for that student to participate in the program. Do so by completing the following section of the form and having your supervisor sign below, consenting to your absence during the travel period, and/or following the procedures stipulated by your Center or other employing unit to obtain and document approval (for example, the Institute for Public Administration has its own form and procedure to use). If you will not have an assistantship or work assignment through the University, you may simply indicate that below.

 has told me that s/he wishes to participate in the

 (name)

 trip from . I approve this student's

(study trip name) (dates of trip)

participation and any changes in work schedule necessitated by the trip. Name of student’s assistantship/work assignment advisor:

Signature of student’s assistantship/work assignment supervisor:

Date