



STUDY ABROAD

# INTEREST FORM

The purpose of this form is to assist in preparing you for your initial meeting with a UCF Abroad advisor. Conducting a self-assessment is a critical first step to defining what program is right for you. Once complete, please email this form to [studyabroad@ucf.edu](mailto:studyabroad@ucf.edu).

Name	Phone
Knights Email	Major/Minor
PID	Credit Hours Currently Completed ( <i>check degree audit on myUCF</i> )

My current student academic standing:

- Freshman  
 Sophomore  
 Junior  
 Senior

I am interested in:

- Summer/Spring Break Programs  
 Semester Exchange Programs  
 Yearlong Programs  
 Internships

Intended study abroad term:

- Summer 2019  
 Fall 2019  
 Spring 2020  
 Summer 2020

I would like to study in:

- Europe  
 Latin America  
 Asia & Oceania  
 Africa

I plan to finance my study abroad with:

*(Please check all that apply)*

- Financial aid  
 Scholarships  
 Family/legal guardian funding  
 Self-funding

I have spoken with my academic advisor about going abroad.

- Yes  
 No



## DESIRED UCF COURSES YOU WISH TO TAKE ABROAD

UCF Abroad suggests 6 courses for a semester and 4 courses for a summer program. This number includes back-up courses in the event that your first choices are unavailable. Please indicate full UCF course name, not abbreviation codes.

- |    |    |
|----|----|
| 1. | 5. |
| 2. | 6. |
| 3. | 7. |
| 4. | 8. |

Preferred appointment days (*check all that apply*)

- Monday  
 Tuesday  
 Wednesday  
 Thursday  
 Friday

Availability (*anytime between 9:00AM-4:00PM*)