



COLLEGE OF THE ATLANTIC INTERNATIONAL STUDENT SERVICES (ISS)

Form #2

OFF-CAMPUS STUDY APPLICATION FOR INTERNATIONAL STUDENTS

Please use this form to officially apply to ISS Office in order to study at ANY off-campus program (including those through COA). Information regarding your program allows COA to have a record of your plan and whereabouts, not only for immigration matters, but also for our records. **This form is due prior to your study off-campus term(s).**

Name: _____ Graduation Year: _____

I am studying away through: Consortium Agreement-with _____ Residency UMaine

Internship Senior Project Eco-League COA Program Other _____

Term(s) I will be off-campus: Fall 20__ Winter 20__ Spring 20__ Summer 20__

Exact dates of program: **from** _____ **to** _____

Residency/Internship/Senior Project Supervisor: _____

Contact Information While Away (if not yet known, provide the information to Monica Hamm as soon as possible)

Mailing Address: _____

Physical Address (where you will be living):

Email you will be using: _____ Phone Number: _____

Home-Country Emergency Contact (name, number, and relationship):

Departure Dates and Location(s): _____

Return Dates and Location(s): _____

Attached Document(s): Consortium Agreement Internship/Residency/Senior Project proposal N/A

Student Signature: _____ Date: _____

This form must be personally submitted to Monica Hamm, Coordinator of International Student Services prior to your off-campus term(s).

Monica Hamm, Coordinator of International Student Services

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