



Application Form Oxford Summer Seminar, July 4- August 14, 2009

Name (with middle name):

Current College Address

E-mail Address

Social Security Number

Telephone:College / Home

Permanent Home Address

Emergency Contact Person(s): (Please give the name and telephone number of the person you would want the Seminar to contact in the event of a serious illness or accident.)



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Date of Birth

Female Male

Health: If there is a recent or current medical condition for which you have been or are being treated and about which the Seminar staff should know, please explain on a separate sheet of paper.

Colleges Attended: (Please give names, dates and any degrees awarded)

Your major

Your anticipated graduation year

Your cumulative average on a scale of A=4, F=0

Name & Address of Person Recommending You



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Accommodation Preference: Modern Single Traditional Shared Suite

Dietary Restrictions (please include vegetarian or vegan preferences, if applicable)

Major Course Preferences (Category A):

1. _____
2. _____
3. _____

Optional Course Preferences (Category B):

1. _____
2. _____
3. _____

Would you like to enroll in the one-credit, pass/fail Seminar Colloquium?

Yes No

Would you like to obtain a Reader's Ticket to the Bodleian Library (\$370 additional charge)?

Yes No

Application Check-list:

- a. Transcript(s);
- b. Letter of recommendation;
- c. \$200 deposit check (\$1000 if after May 1, 2009)
- d. Two-page essay (see application instructions).
- e. OPTIONAL: One-page Scholarship statement (see checklist).

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