

**Office of International Education**

**Consortium for Advanced Studies Abroad in Santiago**

*Application Cover Sheet*

Deadlines for the CASA Santiago Program and Harvard Transfer Credit Applications

March 1 for Fall; October 1 for Spring

*Please submit this cover sheet with all supplementary materials to the OIE at 77 Dunster Street.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Personal Information** | | | |
| Student Name: | | Harvard ID number: | |
| Citizenship: | |  | |
| Email Address: | | Class year: | |
| Permanent Address: | | | |
| Campus Address: | | | |
| Phone: | Date of Birth: | | |
| Passport Number:  Country/Agency of Issue: | Passport Date of Issue:    Passport Date of Expiration: | | |
| **Academic Information** | | | |
| Concentration: | | | GPA (note: minimum requirement 3.0): |
| Secondary Field: | | |  |
| Spanish courses taken at Harvard: | | | |
| Coursework at Harvard that has prepared you for study in Santiago: | | | |
| Academic goals for study in Santiago: | | | |



**Office of International Education**

**Consortium for Advanced Studies Abroad in Santiago**

*Application Checklist*

1. Application Cover Sheet

2. CASA-Santiago Program Application

3. Letter from Spanish Language Adviser confirming your Spanish language level (this can be   
 an email sent to [cnardozzi@fas.harvard.edu](mailto:cnardozzi@fas.harvard.edu) or [ngarcia@fas.harvard.edu](mailto:ngarcia@fas.harvard.edu)

4. Statement of Purpose (500 words)**:**

On a separate page, indicate your interest in studying in Santiago. Describe your proficiency level of Spanish; how comfortable do you feel following a Spanish television or radio program, actively participating in conversation with native speakers; do you speak with near-native fluency? Please discuss courses you’ve taken at Harvard that have prepared you for a semester studying in Santiago and describe any experiences you have had living or traveling in a Spanish-speaking country to date.

5. Copy of Harvard student record

6. Course Preference Form (completed electronically)

7. Proof of health insurance

8. Passport photocopy

9. Passport photo (1)

**Submit all items to the OIE, 77 Dunster Street, no later than March 1 for Fall and October 1 for Spring.**

Applicant Signature

I certify that the information disclosed in this application is true to the best of my knowledge. [NB: Your signature indicates that you authorize the OIE to share with the CASA Santiago program director any information that may be relevant to your participation on this program.]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date