

**APPLICATION TO THE PROGRAM IN EUROPEAN CULTURAL STUDIES**

Date: \_\_\_\_\_

Name \_\_\_\_\_

Campus Phone \_\_\_\_\_

Class \_\_\_\_\_

Campus Address \_\_\_\_\_

PU ID Number \_\_\_\_\_

E-Mail \_\_\_\_\_

Prospective Major \_\_\_\_\_

Freshman Courses

First Term

Second Term \_\_\_\_\_

---

---

---

---

---

Sophomore Courses

First Term

Second Term \_\_\_\_\_

---

---

---

---

Please include a one-paragraph essay explaining your interest in ECS and what you hope to learn from the program. We also would like to know something about your own main interests.

Please may deliver this form to the ECS Office, Room 207 Scheide Caldwell House.