



# LYON PROGRAM

## Application Form

\_\_\_\_\_ Gender:  Male  
 Last Name First Name M.I.  Female

\_\_\_\_\_ City State Zip Code  
 Current Address

\_\_\_\_\_ E-mail  
 Current Phone w/ Area Code Student ID (or SSN)

\_\_\_\_\_ City State Zip Code  
 Permanent Address

\_\_\_\_\_ Applying for: Fall 20\_\_\_\_ (Lyon is a year-long program)  
 Permanent Phone w/ Area Code

City, State and Country of Birth: \_\_\_\_\_

Citizenship:  U.S. Citizen  
 U.S. Permanent Resident  
 Non-U.S. Citizen (Country of Citizenship: \_\_\_\_\_)

Class Status:  Freshman  Sophomore  Junior  Senior

\_\_\_\_\_ Major(s) Minor(s)

In case of an emergency, please contact: (the selected person **must** be a family member)

\_\_\_\_\_ Relationship Phone w/ Area Code  
 Name

\_\_\_\_\_ City State Zip Code  
 Address

\_\_\_\_\_ Fax w/ Area Code (if available)  
 E-mail

To the best of my knowledge, the information given above is true. I understand that misrepresentation of facts in this application will cause for refusal, cancellation of admission, or suspension from the Lyon program. By signing this application, I agree to abide by the policies and regulations of Saint Louis University.

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

Read back 

Please submit the following statement with your application:

- ❑ Statement on your personal history, family background, work experience, travels, interest on attending this program and any other factors that have influenced your personal development. (Please limit to 500 words or 2 pages)

Once you have gathered all required materials, please submit them to the Study Abroad Office at the International Center, DuBourg Hall 150. If you have any questions, please call (314) 977-2318.