



Washington State Community College Consortium for Study Abroad

Budget Request for Study Abroad

Student Name:	Student ID:
Current Email Address:	Have you been accepted into the program yet? Yes No Not Sure
Program Name: WCCCSA Program Website: www.wcccsa.com	WCCCSA Program: 2019 Summer/pre-Fall Quarter Costa Rica Program In partnership with ICLC

Program Dates: Start: <u>08 / 17 / 2019</u> <i>month - day - year</i> End: <u>09 / 14 / 2019</u> <i>month - day - year</i>	Circle the term(s) you will be abroad: Summer Fall Early Fall Winter Spring <hr/> Circle term(s): Quarter Semester Academic Year	OFFICIAL USE ONLY <input type="checkbox"/> All boxes have been completed OIE staff initials: Date stamp here:
--	---	---

To expedite your request, please provide as much of the following information as possible:		
Program Fee: Includes 4 weeks of accommodation with a local homestay family including all breakfast and dinners, on-site orientation, group activities, onsite liability insurance and medical insurance.		3136.00
Tuition	approx.	575.00
Books & Materials		0.00
Food (daily lunch)	approx.	196.00
Roundtrip Airfare	approx.	730.00
Program-Related Personal Expenses (laundry, telephone, daily transportation to school, airport departure tax, and taxi fare to airport)	approx.	300.00
	Estimated Total	4937.00

WCCCSA Study Abroad Campus Coordinator: _____ Date: _____