



Application Form

Name: [Click here to enter text.](#) Gender: Male Female

Address: [Click here to enter text.](#)

City, State & Zip: [Click here to enter text.](#)

Citizenship: [Click here to enter text.](#)

Telephone Number: [Click here to enter text.](#)

Name of the Osgood Center Program Applying: [Click here to enter text.](#)

College or University: [Click here to enter text.](#)

Major: [Click here to enter text.](#) GPA: [Click here to enter text.](#)

Classification: [Click here to enter text.](#)

Email: [Click here to enter text.](#)

Number of Courses in International Relations or Foreign Policy: [Click here to enter text.](#)

Email Address of Someone who can recommend you for the program: [Click here to enter text.](#)

Interested in Conference Housing? Yes No

Information Required for Admission to Government Agencies

SSN or Passport Number: [Click here to enter text.](#)

Date of Birth: [Click here to enter text.](#)

Place of Birth (City, State, Country): [Click here to enter text.](#)

MAIL TO: Shawn Trumbo
Osgood Center for International Studies
1629 K St NW, Suite 300
Washington, D.C. 20006
Phone: 202-642-4485

OR EMAIL TO: Shawn Trumbo sptrumbo@osgoodcenter.org

(Please include the name of the program on the email subject along with your name)

All fees must be submitted by the Application Deadline.

Please note that in case of cancellation after the deadline, there will be no refunds granted.