

**THE GOETHE-INSTITUT INTER NATIONES E.V.  
AND  
MILLERSVILLE UNIVERSITY OF PENNSYLVANIA**

**TRANSATLANTIC OUTREACH PROGRAM CREDIT APPLICATION**

PLEASE TYPE OR PRINT. ALL ITEMS MUST BE COMPLETED UNLESS OTHERWISE NOTED.

**I. GENERAL INFORMATION**

\_\_\_\_\_  
(Social Security number;  
if MU student, use MU ID #)          /    /      
Day    Month    Year      \_\_\_\_\_  
Date of Birth      Ethnicity

\_\_\_\_\_  
Last name      \_\_\_\_\_  
First name      \_\_\_\_\_  
Middle initial

\_\_\_\_\_  
Previous name, if any      U.S. Citizen: Yes \_\_\_\_\_ No \_\_\_\_\_      Gender: M/F \_\_\_\_\_

\_\_\_\_\_  
Permanent Mailing Address/Street

\_\_\_\_\_  
City      \_\_\_\_\_  
State      \_\_\_\_\_  
Zip code

Home phone: (\_\_\_\_\_) \_\_\_\_\_  
Area code      Phone number

E-mail address: \_\_\_\_\_

Are you currently affiliated with a specific school and school district? If so, please identify and provide address below:

Name of Institution: \_\_\_\_\_  
Name of District: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**II. GOETHE COURSE INFORMATION**

TRANSATLANTIC OUTREACH PROGRAM

COURSE NUMBER: GOVT 586      TITLE: *A Direct Examination of German Government,  
Education, Business, and Culture for Social Studies Educators*

FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
(day/month/year)      (day/month/year)

**III. PAYMENT INFORMATION**

Please check your payment option:

\_\_\_\_\_ A U.S. \$ Check, made payable to Millersville University (indicate "Goethe" on memo line).  
Check must accompany this application form for it to be processed.

OR

\_\_\_\_\_ Credit card issued by a US bank. If paying by credit card, please indicate type of card:  
\_\_\_\_\_ Master Card                      \_\_\_\_\_ Visa                      \_\_\_\_\_ Discovery Card

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Amount \$ \_\_\_\_\_

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

**IV. ACKNOWLEDGEMENT OF TERMS OF PROGRAM PARTICIPATION**

I have read, understood and agreed to these terms of participation in the credit acknowledgement program between Millersville University and the Goethe-Institut as contained in "Conditions For Awarding Millersville University Academic Credit".

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of application

**MILLERSVILLE UNIVERSITY TRANSCRIPT MAILING REQUEST**

**THERE IS NO SEPARATE MILLERSVILLE UNIVERSITY TRANSCRIPT FEE. PLEASE ALLOW 10 BUSINESS DAYS FOR PROCESSING.**

1. Number of copies requested? \_\_\_\_\_

2. Send transcripts to (please print clearly):

**Address #1:**

**Address #2:**

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

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

**For educators who have, or are seeking, certification under the Pennsylvania Department of Education (PDE):**

**Would you like Millersville University to report completion of this course to count towards completion of your Act 48 Continuing Professional Education requirements?**

\_\_\_\_\_ **YES**      \_\_\_\_\_ **NO**

**Note: If additional transcripts are needed, please visit the MU Registrar's Office web site at <http://www.millersville.edu/~register/> for instructions and a printable request form.**

\_\_\_\_\_  
**Signature (required)**

\_\_\_\_\_  
**Date**