

Please make checks payable to "Williams College"

# Apply for the ISIC today!



Visit your nearest ISIC (Student), IYTC (Youth) {GO25}, or ITIC (Teacher) Issuing Office and purchase your card on the spot. Don't know where to go? Check out your Study Abroad Office.

Applications must be submitted with:

- One 1" x 1" photo (name printed in ink on the back)
- Payment (unless included in program cost)
- Proof of student, faculty, or youth status as described in categories below
- Copy of driver's license, passport, or birth certificate

ATTACH  
PHOTO  
HERE

**Terms & Conditions**

I hereby certify that this information is true and understand that any false statements on my part may result in forfeiture of all card benefits.

Applicant's Signature				Date
Card	Proof Requirements	Cost	Validity Period	
ISIC (Student)	Photocopy of current school ID with academic year validity visible OR photocopy of your transcript/report card for current academic year.	\$22	September 1, 2006 - December 31, 2007	
IYTC (Youth)	Photocopy of valid driver's license, birth certificate, OR passport showing you are under 26 years of age at the time of application.	\$22	One year from date of purchase.	
ITIC (Teacher)	Photocopy of your faculty ID (showing validity for current academic year) OR letter on school stationery from department chair, school principal, OR other school official verifying faculty status or equivalent during the current academic year	\$22	September 1, 2006- December 31, 2007	

Please read the instructions above before filling out your application. Type or print in clear block letters only.

**Please indicate which card you are applying for:**     Student (ISIC)     Youth (IYTC)     Teacher (ITIC)

**Personal Information**

Name (first, last) \_\_\_\_\_

Institution/School Name \_\_\_\_\_ Expected grad. date (MM/YY) \_\_\_\_\_

Date of Birth (i.e. 09/Jun/82) \_\_\_\_\_ School ID# \_\_\_\_\_

**Mailing Address** (U.S. addresses only)

Street \_\_\_\_\_ Apt. # \_\_\_\_\_

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

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Permanent Address** (if different from above)

Street \_\_\_\_\_ Apt. # \_\_\_\_\_

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

**School Address Stamp** (to be completed by institution)

**School Address** (to be filled out if not stamped above)

Institution/School Name \_\_\_\_\_

Street \_\_\_\_\_

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

**OFFICE USE ONLY**

Int'l ID Card # \_\_\_\_\_ Year \_\_\_\_\_