

UI Supplemental Study Abroad Application & Agreement

Name of Program Applying For (UI Direct, USAC, ISA, etc) _____

University: _____ Country: _____ City: _____

Desired program term (Fall 2011, Winter 2, Spring Break 2011, etc): _____
(please be as specific as possible)

PERSONAL INFORMATION

Name: _____ UI Student ID: _____

Birth Date: _____ Age: _____

City & Country of Birth: _____ Country of Citizenship: _____

Class Standing While Abroad: Fr. Soph. Jr. Sr. Grad.

Gender: Female Male

How would you describe yourself? (optional) African-American/Black White/Caucasian
 Hispanic/Latin American Other
 American Indian/Alaska Native/Aleut/Eskimo
 Asian/Pacific Islander/Hawaiian (including Indian subcontinent)

CONTACT INFORMATION

Current Address: _____ Permanent Address: _____

Telephone: _____ Telephone: _____

UI E-mail: _____ E-mail: _____

Until When? (mm/dd/yy) _____

EMERGENCY CONTACT INFORMATION

1st Contact: _____ Relationship: _____

Address: _____

Telephone _____ E-mail: _____

2nd Contact: _____ Relationship: _____

Address: _____

Telephone _____ E-mail: _____

_____ (please initial) I give permission to UI International Programs, Risk Management, and/or Dean of Students office staff to contact my Emergency Contact(s) in the case of any emergency that may affect me while on my Study Abroad Program.

ACADEMIC INFORMATION

Major: _____ Cumulative GPA: _____

If taking foreign language abroad, university language courses taken: _____

Please read carefully and initial each paragraph.

_____ I authorize the University of Idaho's International Programs Office staff to send/give this application form, my academic records, and any other required records or documents to the prospective host institution/study abroad program or UI faculty program leader. I understand that academic records of work I may undertake at my host institution will be sent to my home institution.

_____ I agree to discuss my study abroad plan with my academic advisor, including the courses I plan to take overseas and how they will apply to my academic program at the University of Idaho.

_____ I agree to notify a University of Idaho Study Abroad staff member in writing and my academic advisor immediately if I no longer want to be considered for placement on this study abroad program.

_____ If I am placed on and attend this study abroad program, I agree that:

- I will take part in all aspects of the program.
- I will pay all program fees.

_____ I understand that if I withdraw from the program anytime after accepting placement, I will be responsible to pay any fees paid on my behalf by the University of Idaho, or the host institution. These fees may be equivalent to the full program fee.

_____ I understand that if I withdraw from the program after its start date, I will be responsible to pay the full program fee.

_____ I understand that my placement may be terminated early by the University of Idaho if:

- I fail to remain enrolled full-time at my host institution (except during summer and other short-term programs that are less than a semester long, and programs that do not carry academic credit),
- I fail to maintain minimum academic standards as defined by my home or host institution
- I am found to be in violation of the laws or regulations of my host country or institution.

_____ I understand that such terminations carry the same financial obligations as withdrawals.

_____ I understand that if I am placed with a host family per my request, or my program requires me to live with a host family, I must live with that host family during my entire study abroad term(s) and that the UI may terminate my study abroad status if I do not comply with this requirement. Students with extenuating circumstances must get written permission from the UI Study Abroad Coordinator prior to making alternative living arrangements.

_____ I will have the status of a non-degree student at my host institution (if applicable) unless I have applied for and have been admitted to a degree program.

_____ My placement will be limited to the period for which I have been originally accepted. An extension can be granted only with written approval from my home and host institutions.

_____ I understand that prior to participation in the study abroad program, the University will require me to sign an Acknowledgement of Risk, Waiver of Liability and Conditions of Study and/or Travel Abroad, and that I must submit for University's prior approval a medical self-assessment, proof of insurance, information release, and advising and credit evaluation agreement (if applicable), all on forms provided by the University.

_____ I am solely responsible for staying up to date on U.S. State Department information about the country/countries where I'll be traveling before and during my trip.

_____ I will register with the U.S. Embassy in the country/countries where I'll be living.

I understand and agree to all the study abroad program stipulations stated above. Furthermore, I verify that all statements made by me on this application form are complete and accurate to the best of my ability.

Signature _____ Date _____