



FACULTY LED APPLICATION FOR EDUCATION ABROAD

Incomplete applications will not be accepted!

Attach
Photo Here

(PLEASE PRINT)

CC ID # _____

FULL LEGAL NAME AS IT APPEARS ON YOUR PASSPORT:

LAST FIRST MIDDLE

Phone: (____) _____
area code

SEX: Male Female

EMAIL: _____ @ _____ . _____

Social Security Number: _____ DOB: _____ Current Age: _____
mm/dd/yyyy

Current Mailing Address: _____
Street City State ZIP

Current address valid until: _____
mm/dd/yyyy

Permanent Mailing Address: _____
Street City State ZIP

ACADEMIC DETAILS:

Current Class Standing: FR SO JR SE Non Degree

MAJOR: _____ MINOR: _____

ADVISOR: _____ CUMM. GPA: _____
***Must meet GPA requirements**

ARE YOU IN GOOD STANDING WITH CARROLL COLLEGE? YES NO
If no, please explain. I understand that my records will be checked.

PROGRAM: _____ FALL 20 ____ SPRING 20 ____ SUMMER 20 ____

EMERGENCY CONTACT INFORMATION: By providing this information you allow Carroll College to contact this person on your behalf in an emergency.

FULL NAME: _____ RELATIONSHIP: _____
FIRST LAST

Home Phone: (____) _____ Cell: (____) _____ Work: (____) _____

EMAIL: _____ @ _____ . _____

ADDRESS: _____
Street City ST ZIP

HEALTH INFORMATION (this information is confidential):

Are you currently being treated for any physical medical issues: YES NO

If yes, please explain:

Are you currently being treated for any emotional or mental health issues? YES NO

If yes, please explain:

Do you have any allergies, dietary restrictions or disabilities? YES NO

If yes, please explain:

RELEASE FOR OFF CAMPUS STUDY

Carroll College assists its students in making off-campus study arrangements only as a service to its students. It is acting solely as an agent for its students and, therefore, does not make any warranties of any kind expresses or implied regarding any off-campus program in which a student may participate. The College assumes no responsibility and disclaims any liability or damages or injury suffered by any student by reason of the negligent or wrongful acts or failures to act of any reason or institution with whom the College may make arrangements for any off-campus study program. The term Carroll College or CC as used above includes the following: The Office of International Programs and Education Abroad Office and any staff therein.

I acknowledge that failure to make full payment of all required fees or to resolve other debts to Carroll College (such as overdue books, unpaid parking tickets, may result in the cancellation of the faculty led program, denial of registration until payment (if applicable) is made, and/or un-enrollment at Carroll College.

I acknowledge that I must fulfill all financial obligations to Carroll College before receiving grade reports, transcripts, or a diploma from Carroll College.

I agree to obey the laws of my host country, and the guidelines of my host site. I will respect the cultural differences I encounter and represent my country and Carroll College with dignity.

The grounds for dismissal include, but are not limited to, any behavior determined by either Carroll College, or the faculty leader to be inappropriate. Such as: breaking the laws or rules of the host country and/or institution, particularly in the following aspects: alcohol consumption, drug abuse, sexual harassment, disorderly conduct or personal assault that endangers or disrupts the peace of any person or institution.

I understand that the grounds for dismissal from a Carroll College Education Abroad program means immediate departure and return to a Carroll determined destination AND that the cost to return, loss of program costs and potential credit, as well as any other related the costs are my responsibility.

I acknowledge that there are risks associated with studying and traveling abroad. I confirm that I have provided Carroll College with current and specific health information that includes any limiting conditions I may have.

I understand that if I am on academic probation or student conduct probation that I might not be allowed to participate and that I might be required to forfeit the total cost of the education abroad program plus any cancellation fees incurred.

I understand and agree to the costs associated with this program, and realize my particular experience may be more or less expensive than estimated by the study abroad office due to fluctuations in the U.S. dollar, and other factors beyond Carroll Colleges' control, the price of all faculty-led programs is subject to change.

I understand that dismissal from the program for violations of conduct or by cancelling on my own accord will result in **no refund**.

I understand that all deposits are **non-refundable**.

The collection, retention and dissemination of your records and information about you is subject to federal regulation under the Family education rights and privacy act of 1974. Therefore, it is necessary for the Carroll College Education Abroad Office to obtain your permission to release information collected on the application, in your transcripts.

I hereby release information contained in my applications for admission and for study abroad, letters of recommendation and transcripts to Carroll College Education Abroad Office for review and approval of my study abroad application.

I give permission for the Education Abroad staff to discuss personal information relevant to this trip with the appropriate individuals, including the registrar's office, the office of student life and the academic dean's office.

I have completed the necessary prerequisites to enroll in this program. I am in good academic, disciplinary and financial standing at Carroll College.

I have read and I understand the above completely, and by signing below, I agree to be bound by these terms as a condition of my participation in any off campus programs sanctioned by Carroll College

I have attached a photocopy of my passport.

I have attached an unofficial copy of my transcript.

I have attached a photo in the upper right hand of page 1.

Applicant's Signature

Date