



## Estimated Education Abroad Expenses:

Program Application fee.....	\$ _____
Deposit.....	\$ _____
Tuition.....	\$ _____
Room.....	\$ _____
Board.....	\$ _____
Insurance.....	\$ _____
Transportation (including airfare, bus, train, travel to obtain a visa etc)	\$ _____
Program Cost for Affiliate Programs	\$ _____
<b>TOTAL TO BE BILLED TO STUDENT ACCOUNT</b>	<b>\$ _____</b>
Books and Supplies....	\$ _____
Personal Expenses.....	\$ _____
Passport fee.....	\$ _____
Visa fee.....	\$ _____
Immunizations.....	\$ _____
Other/Misc.....	\$ _____
<b>PROGRAM TOTAL.....</b>	<b>\$ _____</b>

I certify that **1)** the above information provided by me is true and complete to the best of my knowledge, **2)** that I have been admitted to Carroll College and am seeking a degree from Carroll College and **3)** I am responsible for completing the ACADEMIC PLAN form for approval of credit transfer toward my degree at Carroll and that I will be a full-time student while abroad. I understand that should I attempt fewer credit hours than the number on which my education abroad financial aid package is developed, my package might be adjusted and I might be liable to Carroll and or the US government for any balance owed resulting from adjustments.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Approved by: \_\_\_\_\_

Date \_\_\_\_\_

Michelle Lewis

Director, International Programs

or

Shannon Ackeret

Assistant Director, Study Abroad

**FOR STUDENTS USING APPROVED FINANCIAL AID ONLY**

Approved by: \_\_\_\_\_

Date \_\_\_\_\_

Janet Riis

Director, Financial Aid

**If the student's enrollment status changes, the Carroll Financial Aid Office will be notified.**