

VCU Education Abroad Non-VCU Program Registration

Upon submission of this registration packet, VCU Education abroad will send a consortium agreement to your host institution or organization. *The consortium agreement is a contract between VCU and your host institution that ensures your transcripts will come back to VCU.* Students who choose to study abroad without a consortium agreement risk having their credits denied for transfer, and will not be registered with the university during their period of study.

REGISTRATION CHECKLIST

In order to register, you must submit the following documents to the VCU Education Abroad Office:

- Your acceptance letter from the host institution
- Application for Study Abroad
- Agreement and Release
- Completed Course Approval Form
- One passport-size photo, with name printed on back
- \$150 administrative processing fee, checks payable to VCU

***Note:** Students are issued an International Student Identification Card (ISIC). The **ISIC is required** of all VCU Study Abroad participants. You must submit a passport-sized color photograph (1-1/4" x 1-1/2"). It takes approximately 1 week to process and make the card. Please write the date that you need your ISIC card _____ .
(i.e. Jan 1, 2009)

**Preferred Registration Deadline: April 15 for summer and fall programs
November 15 for spring programs**

Please note: applications will be accepted after these dates

VCU Education Abroad
Office of International Education
817 W. Franklin Street, Room 122
P.O. Box 843043
Richmond, VA 23284
804.827.7882 Fax: 804.828.2552

APPLICATION FOR STUDY ABROAD AND EXCHANGE

Virginia Commonwealth University ♦ Office of International Education ♦ PO Box 843043
817 W. Franklin Street ♦ Richmond, VA 23284-3043 ♦ Tel: 804-827-STUA ♦ Fax 804-828-2552

Student Information

Please type or print: Date of birth _____ Student #: V _____
(i.e. Jan 3, 1988)

Name: _____
First Middle Last

Address: _____

Telephone: _____ VCU Email: _____

Standing: Fresh. Soph. Jr. Sr. Major: _____

Cumulative GPA: _____

Intended Period of Study: Fall 20____ Spring 20____ Summer 20____

Dates of study: __/__/____ to __/__/____

Program: ISEP Univ. Wide Exchange Non-VCU program: _____

Will you apply for financial aid? Yes No

Citizenship: US Permanent Resident Other (Please Specify) _____

Ethnicity* (optional) _____

How did you hear about VCU Education Abroad?

Poster Presentation Friend Study Abroad Fair Prof. Info table Other _____

Location of study: Country _____ City _____

Emergency Contact Information

Name of parent or guardian: _____ Tel: _____

Address: _____

Others we should notify if your parent or guardian cannot be reached:

Name: _____ Tel: _____

Address: _____

Non-VCU Programs Only: Program Contact Information

Please complete using the name of the person who will be receiving the consortium agreement.

Name of Program Contact Name

Fax Number Telephone Number

Mailing Address Email Address

**VCU does not discriminate with regard to age, race, color, national origin, gender, religion, sexual orientation, veteran's status, political affiliation, or disability.*

AGREEMENT AND RELEASE

Program Participation: I agree to participate in all aspects of the study abroad program (instructional, cultural, and social) that are organized by the program, as defined in the program information. I understand that I must be enrolled in the required course work, and that any deviation from the normal course schedule and/or program design must be approved in advance in writing by the program provider.

Program Provider Regulations: I agree to abide by all rules and regulations regarding program participation including authorization for absences from programmed activities, as set out by the program provider, and by all laws, rules, and regulations pertaining to my student status.

Health and Medical Insurance: I certify that I am free of medical conditions that would endanger my life, health, or well-being while traveling or living abroad, or that would impede my ability to fully participate in all aspects of the program. Further, I understand that I must disclose any pre-existing conditions which may affect my participation in program activities. I also certify that I have accident and illness insurance for provision of emergency medical care, as recommended by the program provider or medical authorities of my host country, in case of accident or illness during the program.

Consular Information Sheets and Travel Warnings: Travel abroad is risky for all Americans at the present time. I certify that I have read and discussed with my parents and/or legal guardians all Consular Information Sheets and Travel Warnings provided to me by the program director and/or the Education Abroad Department. I understand that it is my exclusive responsibility to keep informed of any changes in Travel Warnings issued by the Department of State and to decide accordingly on my participation in the Study Abroad Program

Agreement and Release: In consideration of permission granted by the Board of Visitors of the Virginia Commonwealth University, I, for myself, my executors, administrators, and successors hereby release and hold harmless the Virginia Commonwealth University, its visitors, officers, employees, and agents from any and all claims and causes for action including, but not limited to, loss or destruction of property and personal injury, including, but not limited to, death, which may be sustained by me whether within or outside of controlled travel or activity related directly or indirectly to the program.

Financial Aid Authorization: I authorize Virginia Commonwealth University to use Federal Title IV funds, and any other assistance including Federal Title VII funds, provided on my behalf to pay any and all university charges including educationally related activities other than current charges for tuition, fees, room and board. Payment of these charges will be made in full prior to any financial aid refund amount being provided to me. This authorization will remain in effect until such time that I provide written notification to rescind this authorization.

Name (Please Print)

Signature of Parent or Guardian (If Applicable)

Signature of Student

Date of Parent or Guardian Signature

Date of Signature

Date of Birth

Note: Your signature certifies that the information provided in this packet is true and you understand that any false statements on your part may result in forfeiture of the benefits associated with the ISIC.

Education Abroad Course Approval Instructions

To the Advisor:

The student you are advising has now been accepted into his/her study abroad program. The Course Pre-Approval Form is used to approve specific classes in his/her program for transfer to VCU. This is very important, and to the extent possible, should be completed prior to the student's departure for study abroad.

Should classes change for the student while he/she is abroad, students are advised to contact their academic advisor immediately to secure a new VCU equivalent for the course they are now taking. This is also very important, as students cannot afford to spend time and money taking classes for which they will not receive correct credit. Upon return, if there have been changes to the approved courses while abroad, students must fill out a new course approval form with their advisor's signature.

Credit Awarded by:

While the academic advisor assigns the VCU course equivalents, the credit is determined and awarded by the International Credentials Evaluator upon the student's completion of the study period, and VCU's receipt of the student's transcript.

Proposed Course:

The student should list the proposed classes he/she will be taking during his/her study abroad program.

VCU Equivalent:

The academic advisor should indicate the VCU equivalent with which the foreign class corresponds. Students should provide a course description or syllabi to help in choosing the equivalent.

- ❖ Please include the subject or department code and the course number, ex: **HIST 101**.

PLEASE NOTE: *The Education Abroad office can not transfer classes without the subject and course number. The Banner System cannot transfer **ELEC xxx**.*

Use of Course:

Indicate whether the credit will apply to the advancement of the student's degree in their major, minor, as an elective, or to fulfill a general education requirement.

If you have questions, please contact the Education Abroad Office at 827-STUA or abroad@vcu.edu.

Education Abroad Course Transfer Approval Form

To the student: It is essential that you discuss your study abroad plans with your academic advisor(s). You **must** receive approval **before your program begins** for the credit taken while you are overseas. If you do not receive written approval before your program, credit transfer cannot be guaranteed.

Students seeking graduate credit must also have permission from the Graduate Dean for approval of course transfer.

Final approval for any graduate transfer credit is reviewed and approved by the Graduate School.

Student Name (Please Print) _____ Student ID# V _____ Major _____

Name of Study Abroad Program _____ Term (ex: Fall 2008) _____ Name of Institution Issuing Transcript _____

To the faculty member: Please review the course descriptions and/or syllabi to determine if the courses the student proposes to take abroad will fulfill requirements at VCU.

If the proposed course is: -equivalent to a VCU course, please list the department code and the course number (ex: POLI 321).
 -not equivalent to a VCU course, please list the department code and "391" or "491" and indicate use of course.

| Proposed Courses at Host University Ex: PL SC 3889 Political Economy of Europe | VCU Equivalent Ex: POLI 391 | Use of Course | Faculty/Advisor Printed Name | Faculty/Advisor Signature |
|---|--------------------------------|---|---------------------------------|------------------------------|
| | | <input type="radio"/> Major <input type="radio"/> Minor <input type="radio"/> Elective <input type="radio"/> General Ed. | | |
| | | <input type="radio"/> Major <input type="radio"/> Minor <input type="radio"/> Elective <input type="radio"/> General Ed. | | |
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| | | <input type="radio"/> Major <input type="radio"/> Minor <input type="radio"/> Elective <input type="radio"/> General Ed. | | |

Signature, Dean of Graduate School (for graduate credit only)