

REGISTRATION PROCESS

Thank you for choosing an AmeriSpan College Study Abroad program! We want the application process to be clear and easy. Please follow the step-by-step process and make sure that you send everything on the check list.

Step One - Make sure you meet the minimum requirements! Many of our programs do not require previous language study.

Step Two - Make sure that your school will accept the credit for the program you have chosen.* We strongly suggest that you make an appointment with your school's study abroad department for guidelines. While you are there, please have the study abroad advisor sign the Permission to Study Abroad Form.

Step Three – Carefully read the Terms & Conditions and the Study Abroad Checklist. Complete and sign all application forms. Mail your completed application forms and include the following:

- 2 letters of recommendation (from a professor) *may be submitted to AmeriSpan via the online reference form: www.amerispan.com/reference
- · Copy of your transcript (may be unofficial)
- \$200 deposit All payments may be made with personal check, money order, VISA, MasterCard, American Express and Discover. (Full payment is due 4 weeks prior to the start date. Applications and full payments received less than eight weeks prior to the start date will be subject to an additional \$75 late registration fee.)

IMPORTANT NOTE*

Students must arrange acceptance of credit from their university/college before beginning an AmeriSpan program. AmeriSpan will not be responsible for acceptance of credit after the program has ended. After you have completed the program your university or college will receive an official transcript from the U.S. accrediting institution or the foreign university that you have attended. Please hold on to all of your completed documents, exams, papers, syllabi etc, so you may show your school administrator if needed. If needed, AmeriSpan can provide any course descriptions.

COLLEGE STUDY ABROAD APPLICATION CHECKLIST

PRIOR TO DEPARTURE (due by program deadline):

Mail the following to AmeriSpan:

- 1) AmeriSpan College Study Abroad application and SIGNED Terms and Conditions
- 2) Permission to Study Abroad form SIGNED by academic or study abroad advisor
- 3) One transcript from your home institution (may be unofficial)
- 4) Two letters of recommendation *may be submitted to AmeriSpan via the online reference form: www.amerispan.com/reference
- 5) Check or credit card payment to AmeriSpan for \$200 deposit.

Check or credit card payment to AmeriSpan for the full amount of the program (full payment is due 4 weeks prior to the program start date. Applications and full payments received less than four weeks prior to the start date will be subject to an additional \$75 late registration fee.)

Mail all application materials to:

AmeriSpan Study Abroad, P.O. Box 58129, Philadelphia, PA 19102 or fax to: 215-751-1986

You should expect to receive your initial confirmation packet from AmeriSpan within 10-15 business days of your registration. Final confirmation with predeparture details (accommodations, course registration, etc.) will be sent 2-3 weeks prior to your program start date.

IMPORTANT: Contact your local embassy or consulate (www.embassyworld.com) about appropriate travel documentation (visas, passports, etc). Contact AmeriSpan if you need a letter to obtain a student visa.

During Your Study Abroad Program:

- 1) Respect the culture of the country in which you're studying.
- 2) You must attend all classes. If you miss more than 2 days of class in a four-week period, you may not receive full credit. You must make up any missed work during absences.
- 3) Part of your grade will be assigned based on your active participation in class and completion of assignments.
- 4) The grades on your weekly or monthly exams will be factored in to your final grade.

Before You Leave Your Host Country:

Double-check with the on-site staff that all appropriate paper work has been completed to ensure receipt of transcript for academic credit.

COLLEGE STUDY ABROAD APPLICATION

Mail To: P.O. Box 58129, Philadelphia, PA 19102-8129

FedEx To: 1500 Walnut Street, Ste 1306, Philadelphia, PA 19102-3514

Fax To: 215-751-1986

Questions: 800-879-6640 or 215-751-1100



Personal Information

Full Name:	Email:		
Current Address:			
City:		State:	Zip:
Address valid until: Primary Phon	ne:	Additional Ph	one:
Permanent Address (If different from current address	s) Street:		
City:	State:		Zip:
Birth Date://Sex: <u>Male/Fema</u>	<u>ale</u> Married?: <u>Yes/No</u> Current Language	Level:	
Country of Citizenship:	Passport No.:		Expiration Date:
Emergency contact:	Relationship:		
Primary Phone:	Additional Phone:		Email:
Would you like a study abroad airfare specialist to se	end you an airfare quote? Yes/No		
Current Academic Information			
Current School/University:			State:
Academic/Study Abroad Advisor Name:			
Year in School:			
Minor:			
Cumulative Grade Point Average (on a 4.0 Scale):			
Please list the language courses completed prior to the	he program start date?		
Program Information			
Program Location:	Start Date:		End Date:
Number of credits you are applying for:			
SEE INDIVIDUAL COURSE LISTING FOR EACH PROGE			
Language Course Registration	, , , , , , , , , , , , , , , , , , , ,		
1)	3)		
2)			
Elective Course Preference (only available for Langua			
1)			
2)			
3)			

Study Abroad Information (please answer on a separate sheet of paper): 1) How does your decision to study abroad affect your academic/personal/career goals? 2) What do you expect to gain from this program? 3) Have you ever lived or studied abroad before? Yes/No If yes, please explain. 4) What made you choose AmeriSpan?

Lodging Information

Studying with a companion? Yes/No Live Together? Yes/No Companion's name:
Type of Lodging? Homestay/Residence/Apartment/Dormitory (see program description for specific lodging options)
Please list any allergies and/or health conditions:

If you plan to live with a host family, please complete this box

Rank	Host Family Requests:	Yes	No	Either		
	Children				Please note that we do our best with homestay requests but we can't guarantee anything. Please rank your requests in the order of importance.	
	Smokers				rease raint your requests in the order of importance.	
	Special Dietary Needs:					
	Allergies:					

Please mail this completed application form along with:

- Non-refundable \$200 deposit (deducted from total program cost)
- Copy of your most recent transcript (may be unofficial)
- · Two letters of recommendation
- · Permission Form signed by your study abroad advisor
- Signed Terms & Conditions Form

Program Costs

Program Price				
Other costs (extra lodging days, late fees, upgrades)				
TOTAL COST				
Less Enclosed Deposit (minimum \$200 non-refundable deposit req	uired when applyi	ng)		
BALANCE STILL OWED				
Check/Visa/MC/AMEX/Discover #:	_ Exp. Date:	CCV/CCV2:	Amount:	
Cardholder's Name (if different than above)				
Rilling Address (if different than above)				

**PLEASE MAKE SURE TO SIGN THE BOTTOM OF THE TERMS AND CONDITIONS **

Mail all Application Materials to: Amerispan Study Abroad, P.O. Box 58129, Philadelphia, PA 19102-8129 Or: Fax to: 215-751-1986

COLLEGE STUDY ABROAD: TERMS & CONDITIONS

Registration and Payment

To insure a space for an AmeriSpan College Study Abroad program, it is important to register as far in advance from your desired start date as possible.

Registration consists of: 1. Submitting all application materials* and a \$200 non-refundable deposit OR 2. Submitting all application materials* and full payment.

The total cost for the program is due 4 weeks prior to the start date. Applications and full payments received less than eight weeks prior to the start date will be subject to a \$75 late fee. Your program is subject to cancellation by AmeriSpan if payment in full is not received at least 4 weeks in advance. If you are registering less than 4 weeks in advance, payment in full is due with your application. Payments can be paid with personal check (preferred method), money order, VISA, MasterCard, American Express or Discover.

Within 2-3 weeks of receiving your application, AmeriSpan will mail you the "Need-To-Know" fact sheets and a confirmation letter. After full payment and other missing information (such as airline arrival particulars) are received, a final confirmation will be mailed.

* Application Material includes: completed application, signed terms & conditions, permission form signed by your study abroad advisor, official copy of your most recent transcript and 2 letters of recommendation.

Refund Policies

The deposit (\$200) is non-refundable for any reason unless arrangements cannot be made for you at the time you wish to attend. You are entitled to a full refund (excluding deposit) when you cancel more than eight weeks before your start date. If you cancel with less than 8 weeks notice you will receive a refund less a 25% penalty. You will be entitled to no refund after the program starts. If you cancel a program due to a personal emergency and you notify AmeriSpan in writing, we will review your claim and may issue a partial refund.

The above refund policy is exactly the same in cases of cancellation due to war, terrorism or similar cases. Programs can get canceled and/or changed, AmeriSpan is not responsible for these changes. AmeriSpan reserves the right to substitute comparable programs or refund tuition. AmeriSpan's liability is limited to all money paid for the program.

Classes canceled in honor of local holidays will not be made up and are not subject to any refund.

Travel Assistance Program

If you register at least 4 weeks prior to your start date, AmeriSpan will enroll you in a Travel Assistance Program, which includes Emergency Medical Evacuation services, Accident & Sickness medical expenses and other services. Your enrollment is for 1 year and will begin 2-3 weeks prior to your start date. AmeriSpan offers an optional travel insurance upgrade package. Companions of students have the option of purchasing the travel insurance upgrade package through AmeriSpan. Coverage is limited to that outlined in the relevant policies. In no way is AmeriSpan responsible for providing any of the services offered through the policy. Depending on your preferences, additional insurance may be desired and is your responsibility. Neither AmeriSpan Study Abroad, the school or the host family is responsible for any part of any medical bills.

Liability

While participating in this program, you may be exposed to certain risks. These exposures include, but are not limited to accident and/or sickness without readily available medical facilities, the forces of nature, travel in the air, travel on the ground, terrorism, and war. By signing the other side of this form you are assuming all these risks and agreeing to indemnify AmeriSpan Study Abroad, their officers, directors, and employees harmless for any and all liability that may arise in connection with your participation in AmeriSpan programs outside of the United States.

Deposits & On-Site Charges

While participating in this program, you may be responsible for paying additional funds related to your own actions while on-site. Some schools will collect deposits upon your arrival while others will collect only if you incur these charges. Typical extra charges include: lost keys, property damage, overstaying in your lodging, hosting overnight guests in your lodging, and lost books.

Behavioral Expectations

Participants are expected to be courteous and respectful guests. Political involvement, illegal drug use, abusive behavior, or alcoholic consumption by minors cannot be tolerated. AmeriSpan reserves the right to refuse to serve, to cancel and/or terminate participation for any person who fails to comply with the policies of the program provider (e.g. school, tour operator, program organizer), or for any other reason deemed necessary by the sole discretion of AmeriSpan further reserves the right, without escort and without refund, to send home any participant who violates the rules stated above. The return trip will be at the expense of the participant or the participant's family.

Credit Transfer

In order for the credits to be transferred to your school, you will be required to submit a Transcript Request Form (TRF) to the appropriate institution. AmeriSpan will provide you with the necessary information, but we will not be responsible for credits not transferred due to students not submitting a transcript request.

Release and Agreement

I certify that the information submitted on this application is complete and correct and I agree to notify AmeriSpan of any changes. I also acknowledge that I have read the TERMS AND CONDITIONS in the AmeriSpan program literature and agree that they constitute part of my agreement with AmeriSpan, including sections concerning responsibility, payment of fees, status changes, refunds, accommodations and courses. This is a legally binding contract. I certify that I agree to comply with all the terms and conditions stated therein. This agreement will be effective when my application is accepted by AmeriSpan and shall be governed by the laws of the State of Pennsylvania.

Name of Applicant:	
Signature of Applicant	Date:
Name of Guardian (if applicant is under 18 years of age):	
Signature of Guardian:	Date:



Mail To: P.O. Box 58129

Philadelphia, PA 19102-8129

215-751-1986 Fax:

800-879-6640/215-751-1100 Tel:

Email: info@amerispan.com Web: http://www.amerispan.com

PERMISSION TO PARTICIPATE IN AN AMERISPAN STUDY ABROAD PROGRAM

Please have this form signed by your study abroad advisor and return it with your application.

Dear Study Abroad Advisor,

We want your students to have the best possible study abroad experience with AmeriSpan. To help insure this, we feel it is essential that your office be informed and involved. Please confirm (by filling out this form) that this student understands the procedures for transfer of credits to your school as well as use of financial aid (if applicable). Should you have any questions about our programs and services, please do not hesitate to contact me.

Thank you for your collaboration!

AmeriSpan Study Abroad info@amerispan.com (800) 879-6640

Name of Student:
Name of College/University:
Study Abroad Advisor Name:
Study Abroad Advisor Phone:
Study Abroad Advisor E-mail:
Study Abroad Advisor Signature: Date:
*Please indicate the contact person and address of where your transcript is to be forwarded at the completion of your program, thank you.
Contact name:Address: