

Program Name:

Student Name:

Application Packet
For
Appalachian Overseas Education Programs (AOEP) 2008/2009

Congratulations on your decision to study abroad during the academic year 2008/2009! It will be an experience to remember. However, before that experience can begin, you must complete this application packet. Please make sure you read and understand all the forms before you complete and sign them.

While this may seem like an overwhelming amount of paperwork, it will save many people much time if you complete it all correctly now. In this packet is a checklist of all the forms to be completed for students who wish to study abroad on an AOEP. All students must complete and submit the first 9 items on the list that are included in this application packet.

You will be able to retrieve the 10th item – your program specific **Courses, Payment Schedule and Cancellation Policy Form** from our web site at:

<http://www.international.appstate.edu/education/shortterm.html> in the left-hand **Forms/Information** box. Please make sure to attach this form to the application packet you will submit.

If any information changes between the time you fill out the forms and the time your program departs, it is your responsibility to convey that information to your program leader and the Office of International Education and Development (OIED).

Please check off the items on your checklist as you complete each one, and submit the checklist with the rest of your application materials. You are not officially registered for the program until all application materials have been submitted with your non-refundable deposit check. If you have any questions, please contact your program leader or our office.

Office of International Education and Development (OIED)
238 I.G. Greer Hall, Appalachian State University, Boone, NC 28608

Meg Marck-Kennedy, Director, Appalachian Overseas Education Programs
Phone: (828) 262-6692, Fax: (828) 262-4037, Email: marckkennedy@appstate.edu

Nathalie Turner, Assistant Director, Appalachian Overseas Education Programs
Phone: (828) 262-8034, Fax: (828) 262-4037, Email: turnernm@appstate.edu

Appalachian Overseas Education Programs 2008/2009

Application Packet Checklist

NOTE: We strongly recommend that you fill out this packet electronically before printing a hard copy and adding the signatures. If your computer has Adobe Reader, not Adobe Professional, you may not be able to save the form to your computer.

Before submitting your application, please use this checklist to make sure your application is complete. An incomplete application package may prevent you from receiving proper credit or from participating in the program. Check each item you have included or enter "N/A" if the item listed does not apply to you.

Your application is incomplete unless you add and sign a copy of your program specific courses, cancellation and payment policy form from our website. Please return the completed application to your program leader with the non-refundable deposit check and retain a complete set of copies for your files.

All Students must submit these first ten (10) items:

U.S. Department of State – Public Announcement relevant to your destination(s)

(Please initial and return with your application)

Appalachian Overseas Education Programs Application Form

Registration Information Form*

Participant Agreement Form

Student Conduct Code Form

Release Form for Psychological or Mental Health Emergencies

Judiciary Clearance Form

Judiciary Clearance Form was filled out by Student Conduct Office and is attached.

Judiciary Clearance Form was turned in to Student Conduct and will be forwarded to OIED.

Student Handbook Acknowledgement Form (refer to link under Forms/Information)

Financial Aid Release Form

Release for Use of Photograph Form

Fill out and Attach Courses, Payment Schedule and Cancellation Policy Form

(To retrieve from *Forms/Information* left-hand box on our website at www.international.appstate.edu/education/shortterm.html)

*** Please read the Registration Information Form carefully to determine which of these remaining items you must submit:**

Fill out and Attach Permission to Overload Form (Obtain from your Dean)

Fill out and Attach Independent Study Form (Obtain from your Department Chair)

Fill out and Attach Data Sheet (if you are an ASU senior graduating in May 2009 or before)

Retrieve Data Sheet Form at <http://www.registrar.appstate.edu/eforms/datasheet1.pdf>

If you are a non-ASU undergraduate student:

Fill out and Attach Data Sheet

Retrieve Data Sheet Form at <http://www.registrar.appstate.edu/eforms/datasheet1.pdf>

Include a separate check for \$50 (non-ASU students only)

Include a letter from parent institution indicating permission to attend Appalachian State University

NOTE: to later obtain an official transcript of your AOEP course at Appalachian, please go to

<http://www.registrar.appstate.edu/records/official.html> (there is a \$5.00 per official transcript copy).

If you are prospective graduate student:

Retrieve Application Guidelines and Forms for Admission to the Graduate School at

<http://www.graduate.appstate.edu/gradstudies/prospective/applications.html> and submit all necessary items (form, official transcripts, data-sheet, \$50.00 fee, permission forms, etc...) to OIED

REMEMBER THAT YOUR STUDENT ACCOUNT MUST BE FULLY PAID FOR ALL CHARGES (program cost, tuition, parking fines, library fines or anything else) AS STUDENTS WHO FAIL TO DO SO WILL BE DROPPED FROM CLASSES. ONLY STUDENTS WHO ARE ENROLLED IN CLASSES ARE ELIGIBLE FOR THE STATE-MANDATED HEALTH INSURANCE PLAN. AS A RESULT, WE MAY BE OBLIGED TO WITHDRAW YOU FROM THE PROGRAM AT YOUR OWN COST IF YOUR STUDENT ACCOUNT IS NOT CLEARED OF ALL CHARGES.

INTEROFFICE MEMORANDUM

TO: Appalachian Overseas Education Program Applicants

FROM: Meg Marck-Kennedy
Director, Appalachian Overseas Education Programs

SUBJECT: U.S. Department of State – Public Announcements

DATE: September 26, 2008

NOTE: Please initial this form at the bottom of the page.

Your personal safety while you are away from home is very important to you, to your family and to us. Following tragic world events, the U.S. Department of State releases public announcements and Worldwide Cautions.

We would like for you to share these announcements with your family and visit the web page <http://travel.state.gov>. This web page from the U.S. Department of State's Bureau of Consular Affairs offers a wealth of information to the international traveler, including:

- List of Current Warnings and Announcements
- Travel Publications
- Tips for American Students

Frequent updates require that you visit the web site regularly to stay currently informed.

We strongly recommend that you subscribe to the State Department's **Travel Warnings, Travel Alerts** (formerly Public Announcements), and **Country Specific Information** (formerly Consular Information Sheets), by registering at <http://travel.state.gov/mailman/default.php>. Simply click on the *Subscribe* tab and select DOS TRAVEL as your subscription option. This option will allow you to automatically receive, via email, updated information about conditions in and requirements for travel to foreign countries.

Please retain a copy of this memo for your files and reference, initial this memo, and turn it in with your application package. Thank you.

INITIAL HERE



Program Name: _____

Date: _____

Appalachian Overseas Education Programs 08-09 Application Form

238 I. G. Greer Hall • Appalachian State University • Boone, NC 28608 • 828-262-2046 • FAX 828-262-4037

Name: _____
(Last) (First) (Middle)

Date of Birth: _____
(Month/Day/Year)

Banner I.D. Number: _____

Male Female

Country of citizenship if you are not a U.S. citizen*: _____

* This information is requested solely to enable us to notify you as soon as possible whether you may need to apply for a visa.

Local Address: _____
(Street)

Phone: _____

(City) (State) (Zip Code)

E-mail: _____

Permanent Address: _____
(Street)

Phone: _____

(City) (State) (Zip Code)

Are you currently a student at Appalachian State University?
If not, have you been enrolled at Appalachian State at any time?

Yes No
Yes No
If Yes, please specify enrollment dates below:
From: _____ To: _____

Academic Major: _____

Minor: _____

If you wish to travel on a date other than the group schedule, please specify:

Departure: Date _____ From _____
Return: Date _____ From _____

In the event of an emergency, I hereby authorize Appalachian State University to contact my parent(s) or guardian(s). If the participant is eighteen (18) years of age or older, the release of this information is optional but encouraged.

Contact: _____ Phone (home) _____

Address: _____ Phone(work) _____

Cell Phone: _____

Relationship to Participant: _____ Email/Fax: _____

Participant's Signature: _____ Date: _____

Your Name: _____

Program Name: _____

Registration Information Form – AOEP 2008/2009

You must respond to all of the following items, and make appropriate check marks, in order for your registration with Appalachian Overseas Education Programs to be complete.

1. Are you currently an Appalachian student?
 Yes
 No (If "NO" you must complete a DATA SHEET and include a SEPARATE CHECK FOR \$50 made out to ASU. These should be returned with your application materials.)
2. Are you an In-State or Out-of-State Student?
3. Do you expect to get Undergraduate or Graduate credit?
4. What is your expected date of graduation? (Enter N/A if you are non-degree seeking) Term : Year :
 (If you plan to graduate in spring of 2009 you must fill out a new data sheet and indicate "non-degree" unless you have already been admitted to a graduate program at ASU.)
5. **NOTE: We strongly recommend that you meet with your Financial Aid Advisor prior to submitting your application to ensure that you have a financial plan in place that will cover your financial commitment to this AOEP Program.**

Do you expect to receive financial aid or scholarship money for this Appalachian Overseas Education Program?

Yes. If "YES", you must sign the release form at the end of this packet and return it with your other application materials allowing the Office of International Education and Development to access your financial aid information. Be aware that it is YOUR responsibility to fill out the standard financial aid forms in order to determine how much aid you are eligible for.

No

6. Are you a Degree-seeking or Non-Degree seeking student?
7. How many hours of credit do you plan to earn? 3 hours 6 hours 9 hours
8. List the class(es) you plan to take during your Appalachian Overseas Education Program. If you plan to take an independent study, you must complete and submit the required forms signed by your instructor, chair, and dean with your application materials. If you are participating in a summer program, this form needs to be turned in at the Office of International Education and Development no later than February 27, 2009.

9. Please provide the following information for statistical purposes:

Academic Level	Ethnicity/Race	Major Field of Study
<i>Bachelor's Degree</i>	Native American/Alaskan Native	Agriculture
Freshman Sophomore Junior Senior	Asian-American/Pacific Islander	Business and/or Management
	African-American	Education
	Hispanic-American	Engineering
	Caucasian/White/Non-Hispanic	Fine or Applied Arts
	Multiracial	Foreign Languages
<i>Graduate Degree</i>	Do not know	Health Sciences
Master's Professional		Humanities
	Disability	Social Sciences
Gender	No disability	Mathematics/ Computer Sci.
	Disability (includes physical, hearing, vision, mental, chronic health-related, learning, multiple, and other disabilities)	Physical or Life Sciences
		Undeclared
		Other (please specify) _____
	Do not know	

PARTICIPANT AGREEMENT

Applicant's Name: _____

Parent or Guardian's Name: _____
(Parent must sign if participant is under 18 years of age)

Name of AOEP Program: _____

I _____ am a student at Appalachian State University
and I plan to participate in the _____ AOEP Program
from _____ until _____.
(Beginning Date) (Ending Date)

In consideration of permission to participate in the program, I hereby agree and represent that:

1. PROGRAM ARRANGEMENTS

I understand that although the University will attempt to implement the program as described in its documentation, it reserves the right to change the program at any time and for any reason it deems sufficient to promote program objectives, safety issues or institutional needs.

2. TRAVEL AND ACCOMMODATION ARRANGEMENTS

I understand that I am expected to adapt to differences in physical accommodations that may be perceived as inconvenient or uncomfortable by U.S. standards. I further understand that changes in accommodation may be necessary in the best interest of the program or the best interest of the University. I further understand that the University does not represent or act as an agent for, and cannot control the acts or omissions of: any host institution, a host family, other host arrangements, land transportation, air transportation, carrier, hotel or similar accommodation, tour agent, tour organizer or other provider of goods or services related to the Program. I understand that the University is not responsible for matters that are not within its direct control. I understand and agree that the University shall not be liable for any injury, loss, damage, accident, delay, expense or inconvenience arising out of any such matters. I do therefore release the University from any such liability.

3. SITE SPECIFIC ISSUES

I understand that there may be cultural, economic, political and societal factors which may impact this program and my participation. I agree to make reasonable effort to acquaint myself with these factors and to adjust my behavior accordingly.

4. COMMUNICATION REQUIREMENTS

I understand that maintaining contact with program leaders, university officials and other program participants may be very important for safety, health and emergency purposes. I agree to select and utilize appropriate and ongoing communication links with these persons. I also agree to maintain contact with my family or other support structure.

5. INDEPENDENT TRAVEL AND ACTIVITIES

I understand that neither the University, any faculty member nor any other University representative or agent is responsible for any injuries, loss or damage I may suffer when I am traveling independently or am otherwise separated or absent from any University-supervised activities even if a faculty member or other University representative or agent accompanies me in any independent travel or activity not sponsored by or affiliated with the University,

6. HEALTH AND MEDICAL ISSUES

- a. I understand that travel abroad may expose me to certain conditions, diseases or illnesses. I have acquired all immunizations recommended by the U.S. Center for Disease Control and all other inoculations necessary for safe travel in the areas I am visiting. I agree to make reasonable efforts to acquaint myself with the health factors and issues endemic to these areas and to prepare myself accordingly for my study abroad travel and activities.
- b. I have or will secure health insurance through the University to cover my travel and study abroad activities. I understand that the University is not obligated to pay for medical treatment or hospital care in a foreign country or in the U.S. during my participation in the program. I further understand that the University is not responsible for the quality of such treatment or care.
- c. I have consulted with a medical doctor or comparable health care provider with regard to my personal medical status and needs. I certify that I am medically able and capable to participate in the program, in the activities associated with the program and in the travel incident to the program. I certify that I do not have a medical condition which would endanger the health of others associated with the program.

- d. I am aware of all of my personal medical needs and I certify that I am capable of and prepared to deal with those needs. I understand that the University is not obligated to attend to my medical or medication needs.
- e. I understand that there are health risks associated with the program and travel activities. I further understand that the University will not be responsible for the health risks, injuries, damages or loss beyond its direct control.
- f. I agree that if I am injured or become ill, the University or its agents may secure hospitalization and/or medical treatment for me, and I agree to pay all expenses related thereto. I further agree that the University or its agents may release information to other persons who may need this information to assist me or to assist others in the program.
- g. I hereby release the University from all liability for any of its actions or its agents actions related to the activities listed above.

7. SAFETY ISSUES

I understand that there are safety risks associated with the program and travel incident thereto and that the University is not responsible for such risks or injuries, damages or loss caused by them. I agree that the University shall not be liable for such injuries, damages or loss except as may be caused by the gross negligence or willful misconduct of the employees, officials or agents of the University. I further agree that the University cannot prevent other individuals or me from engaging in illegal, dangerous or unsafe activities. I therefore agree that the University shall not be liable for injury, damages or loss caused by such activities.

8. STANDARDS OF CONDUCT

- a. I understand that each foreign country has its own laws and regulations and has standards of acceptable conduct in the areas of dress, manners, morals, politics, alcohol use, drug use and behavior. I recognize that behavior or conduct which violates those laws or standards could harm the program's effectiveness and the University's relations with those countries in which the program is located. I also understand explicitly that behavior or conduct which violates those laws or standards could harm my own health and safety as well as the health and safety of other participants in the program. I take full responsibility for my behavior and conduct and agree that the University and its agents will be released and indemnified for any claim, loss, injury or liability that may be caused by my behavior or conduct. This acceptance of responsibility and release of indemnification applies to my conduct and behavior whether I am or I am not under the direct supervision of the University, University agents or program officials.
- b. I agree to make reasonable and good faith efforts to become informed of all laws, regulations and standards for each country to or through which I travel during my participation. I further agree that I will abide by and comply with those laws, regulations and standards.
- c. I also agree to comply with all University rules, standards and instructions for student behavior, including but not limited to, those set forth in Appalachian State University's *Code of Student Conduct*. I further agree to comply with any supplemental rules or standards adopted by the University for the programs in which I am participating. (Please see <http://studentconduct.appstate.edu/>, click on *Code of Student Conduct* for full text version of ASU's *Code of Student Conduct*)
- d. I agree that the University has the right to enforce all of the standards of conduct, rules and regulations described above. I further agree that if I violate those standards, rules or regulations, I may be sanctioned including immediate exclusion from the program. I recognize that due to the circumstances of foreign travel and foreign study programs, normally applicable procedures for notice, hearing and appeal in student disciplinary proceedings may not be practicable and therefore may not apply. I explicitly waive all claims based on alleged inadequate disciplinary procedures.
- e. If I am excluded from the program, I consent to being sent home at my own expense with no refund of tuition, fees or expenses. I further understand that I may be subject to further disciplinary, civil and/or criminal action upon my return to the University. If I am excluded from the program, I understand that I may receive failing grades for the study abroad credit.
- f. I also recognize that if my behavior is determined to be detrimental to or incompatible with the interest, harmony and welfare of the University, or program or program participants, my acceptance of responsibility, my waiver of process and my consent of being sent home also apply if I engage in such detrimental or incompatible behavior.
- g. I agree that I am fully responsible for any legal problems that I have. I also agree that I am responsible for any encounters that I have with any foreign government or any individual. I understand and agree that the University is not responsible for providing any assistance under such circumstances.

9. PROGRAM CHANGES

I understand that the program is subject to modification or cancellation because of natural disasters, political instability, insufficient participation or other causes. I further understand that if one of these occurs, I may not have any fees or expenses refunded. I further understand that program fees and charges are based on current airfares, lodging rates and travel costs, which are subject to change and for which I am responsible. I further understand that if I leave or am excluded from the program for any reason there will be no refund of fees paid or expenses incurred. I further agree that if I lose connections or become detached from the program group or if I become sick or injured, I will at my own expense contact and reach the program group.

10. OTHER EXPENSES OR INSURANCE

I understand that I am responsible for my own accident, travel, baggage, missed flight and life insurance coverage. I also understand that I am responsible for all debts and expenses I incur abroad other than those covered by the required program fees.

11. ACKNOWLEDGEMENT OF MY RESPONSIBILITY AND ASSUMPTION OF RISK

I fully understand that this program will expose me to many risks associated with foreign travel and participation in a program abroad. I fully accept this possibility of risk and assume all risks associated with this program. I therefore agree to release, hold harmless, discharge and indemnify Appalachian State University, the UNC Board of Governors, University officials, employees, agents and volunteers from any present or future liability, claim or demand that may be asserted in connection with (a) emergencies, accidents, illnesses, injuries or other consequences or events arising from my participation in the program, (b) any cause, event or occurrence beyond the direct control of the University or its agents including, but not limited to natural disasters, wars, civil disturbances, terrorist acts or the negligence of other persons, and (c) events or occurrences caused by my behavior or conduct while traveling or participating in the program. Further, I understand and agree that this acknowledgement, discharge, hold harmless agreement, release, indemnification and assumption of risk shall be binding on me, my heirs, my assigns, members of my family, my executors and administrators and my personal representatives.

12. VOLUNTARY ACKNOWLEDGEMENT

I represent that my agreement to the provisions herein is wholly voluntary, and further understand that, prior to signing this agreement; I have the right to consult with the advisor, counselor or attorney of my choice.

13. INTERPRETATION OF AGREEMENT

I agree and acknowledge that the laws of North Carolina govern this agreement and that North Carolina shall be the forum for any lawsuit, hearings or adjudications filed under or incident to this agreement or to the program. I further agree that should any provision or aspect of this agreement be found to be unenforceable, that all remaining provisions of this agreement shall remain in full force and effect.

14. I AM OBLIGATED TO ENSURE THAT MY PARENTS/GUARDIAN READ THIS DOCUMENT

I will give this document to my parents/guardians. Furthermore, I authorize the University to share any other documents and/or information related to my participation in the program with my parents/guardians for the purpose of informing them about the nature of the program, the obligations I have undertaken pursuant to this agreement, and my experience in the program. I understand that a copy of each record disclosed pursuant to this authorization must, upon request, be provided to me.

I have carefully read, understand and fully agree with this agreement. This agreement represents my complete understanding with the University concerning the University's or its agents' responsibility and liability for my participation in the program. This agreement supersedes any previous or contemporaneous understandings I may have had with the University or its agents, whether oral or written. I represent that I am at least eighteen years of age or if not I have secured below the signature of my parents as well as my own.

Printed Name of Student

Student Signature

Date

Parent's or Guardian's Signature (only if student is under 18)

Date



STUDENT CONDUCT CODE FOR PARTICIPANTS IN APPALACHIAN OVERSEAS EDUCATION PROGRAMS

To participate in a study abroad program under the aegis of Appalachian State University, you must agree to abide by the following common-sense standards of behavior:

1. Students must recognize their ambassadorial responsibilities as Americans and members of the Appalachian State University community. Appalachian's reputation is at stake. Therefore, any behavior creating a negative impression or that is detrimental to the image of Appalachian must be avoided.
2. The provisions of this Student Conduct Code for Participants in Appalachian Programs at Appalachian State University are supplemental to other policies governing conduct of Appalachian State University students, including, but not limited to, the Appalachian State University Code of Student Conduct and Academic Integrity Code.
3. Treat all property, including temporary and long-term lodging facilities and personal property, with care and respect in order to avoid damage or other abuse. Just as a student is responsible for damages to the condition of his or her dormitory room on campus, a student is responsible for damages to facilities abroad.
4. Act with patience, politeness and civility (in accord with local cultural standards) towards all service persons, hosts, and others. Promptly pay charges for food, beverages, etc. Avoid boisterous, loud, and otherwise disruptive behavior in all public places. Observe quiet hours during night when other residents and guests are attempting to sleep where you are lodging.
5. Respect the right to privacy of other program participants. A successful study abroad program is dependent upon considerate and unselfish behavior by all.
6. A student may not use or possess illegal drugs. Should authorities be involved, students will be subject to the laws of the country they are visiting, and will be responsible for retaining and paying for legal representation. A student in possession of illegal drugs will be subject to immediate termination in the program; student will be sent back to the U.S. at his or her own expense.
7. Occasional drinking of alcoholic beverages in moderation is permitted provided that students are of legal drinking age in the country in which they are visiting. Excessive drinking is determined by behavior detrimental or incompatible with the interest, harmony and welfare of the University, or program or program participants. Program participants engaging in such behavior accept responsibility and waive their right of process and consent to being sent home at their own expense.
8. Students should recognize that driving or renting a motor vehicle, motor bike, etc. exposes them to certain risks and therefore the University discourages it. However, if a student chooses to do so, then he or she is advised to carry sufficient insurance for adequate coverage in the host country. In addition, students will be responsible for costs of litigation and other expenses that may be incurred as a result of accidents or infractions of local laws.
9. Students are expected to be on time for scheduled program events or activities. If you miss a travel departure time, you will be on your own and it will be at your expense to catch up with the group. The program leader will not stay behind, but will continue on the schedule with the group. Unless otherwise stated, a student's participation in all scheduled activities in the Appalachian Overseas Education Program is required.
10. Additional responsibilities may be required for participation in some programs.
11. A student must always notify the program leader of his/her whereabouts if he or she deviates from the group activities.
12. Students should always show respect for the program participants and program leader. When necessary, the program leader will determine the appropriate disciplinary action required for violations of this student code of conduct. A program leader's decision is final.

I have read all 12 points and agree to abide by the policy of the conduct code.

I certify that I am at least eighteen (18) years of age, medically and mentally sound, physically fit to participate in the program for which I am applying, and competent to enter into this agreement. I further certify that no oral promise, agreement, warranty or representation concerning safety or liability has been made to me.

Student Signature

Date

If the participant is under eighteen (18) years of age, this document must be signed on behalf of the participant by his or her parent or guardian. I have read and understand this assumption of risk and indemnification agreement, I understand and agree that it will legally bind me and my estate, and I sign it voluntarily.

Signature

Printed Name

Relationship to Participant
(Parent or Guardian)

Date

Release Form
For Psychological Or Mental Health Emergencies

I give the personnel in the Office of International Education and Development of Appalachian State University and/or of my host institution permission to consult staff members of the Counseling and Psychological Services Center of Appalachian State University in case of a psychological or mental health emergency. I further give the Counseling and Psychological Services Center staff permission to contact anyone necessary to protect my health and safety.

Printed Name of Student

Printed Name of Witness

Address of Witness

Student Signature

Witness Signature

Date

Date

Judiciary Clearance Form - Appalachian Overseas Education Programs (AOEP) Applicants -

Appalachian Overseas Education Program Name: _____

I. To the Student: This form must be completed by the Director of the Office of Student Conduct located on the second floor of the Plemmons Student Union at Appalachian State University. Your signature below provides consent for the release of this information.

Student's name: _____

Banner I.D. Number: _____

Student's signature: _____

Date: _____

II. To the Office of Student Conducts: The student named above has applied to participate in an Appalachian Overseas Education Program. We would appreciate a confidential statement evaluating this student's record at Appalachian State University. While prior disciplinary history does not preclude a student's participation in our programs, this information is taken into consideration during review and must be submitted in order for the student to be evaluated for admission in the program. Please check the appropriate box and fill out the form accordingly. Return of this form at your earliest convenience will expedite this student's application.

This student has not received a judicial sanction at this institution.

This student is not currently under an active judicial sanction, but has been previously sanctioned as follows:

Adjudication Date	Sanction with Effective Dates	Charge/Allegation
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Adjudication Date	Sanction with Effective Dates	Charge/Allegation
-------------------	-------------------------------	-------------------

Adjudication Date	Sanction with Effective Dates	Charge/Allegation
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Adjudication Date	Sanction with Effective Dates	Charge/Allegation
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This student is currently under the following judicial sanction(s):

Adjudication Date	Sanction with Effective Dates	Charge/Allegation
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Adjudication Date	Sanction with Effective Dates	Charge/Allegation
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Additional Comments: _____

Judith M. Haas
Your name

Director, Office of Student Conduct
Title

Signature

Date

Please turn in your Appalachian Overseas Education Program application packet only AFTER this form has been completed by the Director of the Office of Student Conduct. If the form was returned to you, attach it to the packet. If Student Conduct will be forwarding this form to OIED at a later date, please specify on the Application Packet Checklist Page.

APPALACHIAN OVERSEAS EDUCATION PROGRAMS
Student Handbook Acknowledgement Form

I have retrieved and read the Appalachian Overseas Education Programs Student Handbook posted online at <http://www.international.appstate.edu/education/shortterm.html>, and I am familiar with the information it provides to program participants.

Printed Name of Student

Student Signature

Date

APPALACHIAN OVERSEAS EDUCATION PROGRAMS
Financial Aid Release Form

Student Name

Banner I.D. Number

I give permission to the Financial Aid Office to release my financial aid status to the Office of International Education and Development.

Student Signature

Date

RELEASE FOR USE OF PHOTOGRAPH

I hereby grant to Appalachian State University (hereafter referred to as "ASU"), its legal representatives and assigns, and those acting with its permission, or its employees, the right and permission to use and/or copyright, reuse and/or publish, display (including in PowerPoint and other presentations), and republish photographic or digital pictures or images of me, or in which I may be distorted in character, or form, in conjunction with my own or a fictitious name, on reproductions thereof, in color or black and white, made through any media by ASU, for display and other purposes, including the use of any printed matter in conjunction therewith.

I hereby waive any right to inspect or approve the finished photograph or copy or printed matter that may be used in conjunction therewith or to the eventual use that it might be applied.

I hereby release, discharge and agree to save harmless the State of North Carolina, the University of North Carolina, ASU, its representatives, assigns, employees or any person or persons, corporation or corporations, acting under its permission or authority, or any person, persons, corporation or corporations, for whom it might be acting, including any firm publishing and/or distributing the finished product, in whole or in part, from and against any liability as a result of any distortion, blurring, or alteration, optical illusion, or use in composite form, either intentionally or otherwise, that may occur or be produced in the taking, processing or reproduction of the finished product, its publication or distribution of the same, even should the same subject me to ridicule, scandal, reproach, scorn or indignity.

I hereby warrant that I am over eighteen years of age, and competent to contract in my own name insofar as the above is concerned.

I HAVE READ THE FOREGOING RELEASE, AUTHORIZATION AND AGREEMENT, BEFORE AFFIXING MY SIGNATURE BELOW, AND WARRANT THAT I FULLY UNDERSTAND THE CONTENTS THEREOF.

Student's Name

Name of Witness

Address of Witness

Student's Signature

Witness's Signature

Date

Date

If under the age of eighteen, parent must sign below:

I hereby certify that I am the parent and/or guardian of _____, a child under the age of eighteen years, and I hereby consent that any photographs which have been or are about to be taken may be used by the parties for the purposes set forth in the release hereinabove, signed by the child, with the same force and effect as if executed by me.

Name of Parent or Guardian

Signature of Parent of Guardian

Date