



To: PROSPECTIVE STUDY ABROAD STUDENT

Welcome to an academic adventure of a lifetime! You will experience a new culture, a new language (or a new use of English), and a new way of learning. In order to study abroad and get academic credit from Winthrop, you must first obtain approval through this application process and complete all forms required for enrollment. If you have any questions, please contact the International Center at 803-323-2133 or studyabroad@winthrop.edu.

To apply, submit the **5 items below** by the deadline indicated here:

Fall or Academic Year Study: March 1*

Spring Study: October 1*

*Please note that program application deadlines for Egypt, Panama and Spain may be earlier than the Winthrop Application deadline. Students applying for these programs are encouraged to research the program application deadline and submit their applications early.

Required items:

- Completed Winthrop *Study Abroad Application Packet*
- Host institution/program application plus any required documents
- Application Fee (\$200, payable by check to Winthrop University International Center)
- Official Winthrop Transcript from Records and Registration in Tillman 126
- Copy of the photo/info page of your passport. If you do not yet have a passport, you should start the application process now. Passport application forms can be picked up on the International Center.

There will be a **PRE-DEPARTURE WORKSHOP** to prepare you for your study abroad semester. Sessions are usually held on the last Friday of the semester at 2 pm and may last up to two hours. You will be notified of the session(s) appropriate for your program. **Attendance is mandatory.**

STUDY ABROAD APPLICATION PACKET Fall deadline: Mar. 1
ACADEMIC YEAR and SEMESTER PROGRAMS Spring deadline: Oct. 1

This application seeks to obtain approval from Winthrop University for you to pursue studies abroad. Study Abroad participation is contingent upon a student's good standing (academic, disciplinary, financial) with Winthrop University. If you have extenuating circumstances you think should be considered, submit a statement addressing these circumstances with this application.

Approval does not constitute or guarantee admission into your chosen program, credit transfer, or financial aid transfer. You will secure these through other parts of the study abroad preparation process.

- Instructions: 1. Please read and complete each part of this document.
2. Return packet and non-refundable \$200 application fee (payable to the WU International Center) to The International Center, 212 Dinkins, by the published deadline.

PERSONAL DATA

Name: _____ Winthrop ID#: _____

Major: _____ GPA: _____ Email: _____

Projected year at Winthrop during study abroad (circle one): Fr So Ju Sr Grad Student

Projected graduation date: _____

Study Abroad Program/University: _____

Study Abroad Country: _____ Term Abroad: _____

Date of Birth: _____ Passport #: _____

Place of Birth: _____ Citizen of: _____

Winthrop Address (until what date? _____): Local/Cell Phone: __________
Street City State Zip**Permanent Address:** Phone: __________
Street City State Zip**EMERGENCY CONTACT**

Name/s: _____ Phone: _____

Relationship/s: _____ Email: _____

Street City State Zip

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA) WAIVER

I, _____, WU ID Number _____ hereby give the International Center of Winthrop University permission to speak with my parent(s) or guardian(s) listed below regarding any issues which may arise while I am participating in a program associated with Winthrop University outside of the United States. I grant this permission freely.

Parent(s)/Guardian(s) name(s): _____

Home phone number: _____

Mother's work phone number: _____ Cell phone _____

Father's work phone number: _____ Cell phone _____

Family email addresses: _____

Participant Signature _____ Date _____

PROGRAM PROMOTION (optional) I do do not grant, for any purpose connected with promoting the Winthrop University study abroad or student exchange program but not for commercial exploitation, the right of Winthrop University to use my name, voice and likeness in any writings, photographs, films and recordings as a result of participating in this program, including any biographical information submitted by the participant to Winthrop University, and to use, reproduce, publish, and distribute the same.

ACADEMIC RESPONSIBILITY

Please initial below signifying your agreement to each point:

_____ I agree to attend all orientations at the home and host campuses.

_____ I agree to attend regularly scheduled classes at the host institution.

_____ I agree that I am responsible for making sure that courses taken and academic credits earned from the host institution transfer back to my Winthrop University academic record.

_____ I acknowledge that I receive transfer credit only for those courses I pass with a C or higher.

_____ I acknowledge that no study abroad grades are averaged into my Winthrop GPA.

_____ I acknowledge that all study abroad grades, including Ds and Fs, are averaged into my GPA used to determine eligibility for my financial aid and for honors designation at graduation.

_____ I agree to invest the same amount of time and effort on course work that is required at Winthrop.

HEALTH AGREEMENT

Please initial below to signify your agreement to each point:

- _____ Studying abroad requires overall good health. I understand that travel abroad often puts additional stress on one's physical, mental, and emotional condition and agree that I am physically, mentally and emotionally capable of participating in the program.
- _____ I assume all risk and financial responsibility for any loss or injury that may occur to me while participating in the program.
- _____ I assume all risk and financial responsibility for any loss or injury that may occur to others as a result of my negligence or misconduct.
- _____ I certify that I have adequate international health and accident insurance coverage as described below and I am covered for the entire period of my participation.

HEALTH INSURANCE COVERAGE

Health and accident insurance coverage is required of all participants in Winthrop University study abroad programs. The policy **MUST** include coverage for basic medical, sickness, injury, medical evacuation, accidental death, dismemberment and repatriation coverage. If you plan to travel before the program starts or after it concludes, the policy needs to cover you for the entire period.

- I am covered by the following international health and accident insurance policy:

Insurance Company: _____ Policy#: _____

Street City State Zip Phone

- I plan to enroll in Winthrop's CISI International Health Insurance Policy.

CONDUCT INFORMATION

I acknowledge that participation in this program is contingent upon my good standing with Winthrop University and hereby authorize the Dean of Students Office to release information regarding my disciplinary file and other educational records to the International Center. This waiver will expire at the conclusion of my participation with the Study Abroad/ Student Exchange program.

Name: _____ Signature: _____

Date: _____ Winthrop ID #: _____

STUDY ABROAD POLICIES AND ASSUMPTION OF RISK

Read and initial next to each item.

- ___ 1. **FINANCES.** I acknowledge my participation in this study program and understand that I am accountable for all program fees. I acknowledge that an official hold may be placed on my records until all financial responsibilities are fulfilled.
- ___ 2. **PERSONAL CONDUCT.** I understand that during the study abroad program I am subject to Winthrop's Student Code of Conduct and that of the host institution/program. I also acknowledge that Winthrop University, through its official representatives, has the authority to establish additional rules of conduct necessary for the safe and effective operation of the program. The rules apply during the entire period of the program, including free time. The use of drugs during the program is strictly prohibited and can be cause for dismissal from the program. I am responsible for my personal conduct and understand that I can be dismissed from the program for violation of program rules.
- ___ 3. **LOCAL LAWS AND CUSTOMS.** I agree to respect and adhere to the laws and customs of the host country and understand that the violation or disrespect for those laws and customs may result in my dismissal from the program. Furthermore, I acknowledge that the violation of such laws and customs may have legal ramifications with consequences beyond the control of Winthrop University and even the US Government.
- ___ 4. **DISMISSAL.** Winthrop University, through its official representatives in collaboration with the home and host campus, may decide that a participant must be dismissed from the program because of violation of any stated rules, for disruptive behavior, or for any conduct that might bring the program into disrepute or its participants into legal jeopardy. That decision will be final. Dismissal from the program will result in the loss of all academic credit for the program. Persons dismissed from the program will remain responsible for all program costs and any additional costs resulting from their dismissal and early departure.
- ___ 5. **ORIENTATION.** I agree to attend all orientation, pre-departure, and re-entry meetings and read any preparatory materials given to me.
- ___ 6. **INSURANCE COVERAGE.** I acknowledge that I am required to have health, accident, and hospitalization insurance during my participation in the study abroad program. The policy must include coverage for expenses relating to sickness, injury, medical evacuation, accidental death, and repatriation.
- ___ 7. **MEDICAL TREATMENT.** I have read and understand the Study Abroad Health/Emergency Information sheet provided to me and know what actions to take for support and assistance in preparing for my study abroad experience. In the event of illness or injury to me to such an extent that I am unable to make decisions relative to my immediate medical condition, I authorize any official representative of Winthrop University to secure on my behalf medical treatment, including surgery and the administration of an anesthetic, and I accept all financial responsibility for such treatment.
- ___ 8. **RESPONSIBILITY DURING FREE TIME.** I acknowledge that during free time before, during and after the period of this study abroad program, I may elect to travel independently at my own risk and expense. I agree to inform an official representative of the Winthrop University International Center of my travel plans. I also agree that neither Winthrop University nor its representatives are responsible for me during such free time.
- ___ 9. **ASSUMPTION OF RISKS.** I acknowledge that there are risks involved in international travel and study abroad program participation, including but not limited to dangers to my own health and personal safety posed by civil unrest, use of public transportation, political instability, terrorism, crime, violence, and disease, and that I am willing to assume those risks. I further acknowledge that health, safety and security standards vary greatly around the world and I have reviewed the U.S. Consular Information Sheets and Travel Warnings [contained on the U.S. Department of State Consular Affairs web site] and the Traveler's Health section of the Center for Disease Control's web site regarding travel to and around the country in which I plan to study abroad. I agree that during the period of this study abroad program I release and forever discharge Winthrop University, and its official representatives, from any liability for damage to or loss of my possessions, as well as any injury, illness or death arising out of or in any way relating to my participation in study abroad programs.
- ___ 10. **WITHDRAWAL/REFUND POLICY.** I acknowledge that if I withdraw from the study abroad program, even if for reasons beyond my control, prior to or while studying abroad, the withdrawal and refund policy and deadlines of the host institution or program provider will be followed. If I have paid tuition and/or fees to Winthrop University, I understand that I will be responsible for any tuition or fees that Winthrop has paid or owes to the host institution or program on my behalf which may equal or exceed Winthrop's tuition and fees. These costs may include: tuition, tuition deposits, cancellation fees, room and board, study tour fees, and any other non-recoverable expenses. Additionally, the \$325 study abroad participation fee is non-refundable after Winthrop's add/drop deadline. In addition, I will be responsible for any non-refundable out-of-pocket expenses, including airfare, housing costs or other related travel and living expenses. I understand that travel insurance may be available to cover some of these costs and it is my responsibility to research such insurance options.

I understand that it is my responsibility to read and understand the withdrawal and refund policies of the host institution or program provider. In the event that the host institution does not have a refund policy, the current Winthrop withdrawal policy will be followed. I understand that if I cannot locate my host institution's withdrawal and refund policy, I may contact the Winthrop Study Abroad Coordinator for assistance.

I have completely read this WINTHROP STUDY ABROAD APPLICATION PACKET, including:

Personal Data (p. 1)

FERPA Waiver (p. 2)

Student Academic Responsibility (p. 2)

Health Agreement (p. 3)

Health Insurance Coverage (p. 3)

Conduct Information (p. 3)

Study Abroad Policies and Assumption of Risk (p. 4)

Study Abroad Health/Emergency Information (p. 6-7)

I thoroughly understand the information provided, and have asked questions if I did not understand it. My signature below indicates that I have provided true and accurate information and give my complete and willful consent to the terms set forth.

Signature of Participant

Date

Signature of Parent/Guardian (if student under 18 years of age)

Date

Student: Read thoroughly and keep for your records

STUDY ABROAD HEALTH / EMERGENCY INFORMATION

Every Winthrop University study abroad participant must *read, sign, and return this form* indicating they understand health issues that may relate to their participation on a study abroad program.

I. Medical Conditions

Winthrop University recommends that all students get a thorough physical examination before participating in study abroad. Discuss with your physician your intent to study abroad and get advice for managing your physical and emotional health while in another country. Discuss your health condition (allergies, disabilities, psychological treatment, dietary requirements, and medical needs) with your physician, and seriously consider the appropriateness of your participation in study abroad in your chosen host country.

Actions:

1. If you have any medical or psychological condition that may require attention while you are abroad, discuss this with your physician before going abroad.
2. Speak to your physician and/or the Winthrop Travel Clinic about any medications you take regularly, the quantities you can take with you, and its availability abroad.
3. Take necessary medications (in original, labeled containers) and written prescriptions with you.
4. It is advisable that you carry a letter from your doctor explaining the use of your medication so it is not suspected as contraband.
5. Get necessary immunizations well in advance of your departure.

II. Medical Facilities/Services

Medical facilities and services will not be the same in every country. It is important to understand as much as possible about the facilities and services in your host country before you should need them.

Actions:

1. Be sure you get information in your program-specific orientation about medical facilities and services in your host city/country.
2. You will need to understand where to go for common health needs (i.e., cold, stomachache, flu, etc.) and where to go for emergencies.
3. You will need to know how medical services are paid for (i.e., out-of-pocket by the student, host country or institution, insurance, etc.).
4. Understand your insurance coverage before going abroad (does your insurance cover you in another country, what is covered, what is not, how to make claims, etc.).
5. You will need to know who to contact in case of a medical emergency.

III. Disabilities

Students requiring accommodations for a medical condition and/or disability during a study abroad program experience must submit an accommodation letter from Services for Students with Disabilities to the Winthrop International Center and/or the host country Program Director before going abroad. The earlier the request is made, the more measures the International Center can take to discuss accommodations in the host country.

Please note: "reasonable accommodations" provided on the Winthrop campus may differ and/or may not be available in the host country.

Actions:

1. Schedule an appointment with Services for Students with Disabilities and the Study Abroad Coordinator to discuss services available in your chosen host country and documentation you may need for your host institution.
2. After review and consultation with your host institution, the International Center will notify you about the availability of your requested accommodations. If the requested accommodations are not available in the chosen host country and/or institution, the Study Abroad Coordinator, in consultation with Services for Students with Disabilities, will discuss your options with you.

(over)

Student: Read thoroughly and keep for your records**IV. Mental Health**

Not all countries have mental health support services similar to what we are accustomed to in the U.S. Thus, students may not have access to mental health services in some countries. Whether students have utilized mental health services in the past or not, it is important for students to know **if**, what, and where those services are available in their host country.

Actions:

1. All students should begin preparing for cultural adjustment before studying abroad. Attend pre-departure orientation to learn about the cycle of adjustment to a different culture. Although this information will not prevent students from experiencing cultural adjustment problems, it will prepare them for the symptoms, the expected cycle, and some helpful advice for a successful adjustment.
2. Students who are currently, or have utilized mental health services in the past, should contact the Winthrop Health Center before going abroad. The Health Center should be advised as to your needs so they can help you develop a health care plan while abroad.
3. Students who are currently involved with mental health services should seriously discuss the advisability of participating in study abroad and issues related to cultural adjustment with their mental health practitioner.

V. Emergency Protocol

The vast majority of students participating in study abroad never experience an emergency while abroad. However, any emergency is less traumatic when you are prepared to deal with it effectively and efficiently. It will make you feel more comfortable if you take the time to prepare an emergency protocol when you arrive at your host location.

Actions:

1. Carry some form of identification with you at all times (your name, your host country address, host country phone #, copy of passport and visa).
2. Carry emergency numbers and contacts with you:
 - local police
 - study abroad or residential coordinator in host country
 - parent/guardian/emergency contact at home
 - Winthrop police and International Center contact information
 - Embassy in host country
 - Insurance contact information
 - physician and mental health practitioner at home
3. Know where the local hospitals are located and how to get there.
4. By preparing yourself to respond to different types of emergencies you will feel more confident that you know what to do in the rare event that an emergency should occur.