ELIGIBILITY CRITERIA:

The Study Abroad Program is offered to any student who has accumulated a minimum of 45 credit hours and has achieved a GPA of at least 2.75.

Application Checklist:

- Completed application form.
- Conditions of Participation form.
- Release of Information Agreement form.
- Academic Responsibility Agreement form.
- Student Medical Information form.
- Official academic transcript.
- A 500-word personal essay. The essay should include:
  - the academic reasons for the proposed course of study,
  - the relevance to academic objectives,
  - what you hope to achieve during your study abroad experience, and
  - why you would be a good candidate for study abroad.
- Two faculty recommendation forms.
  - one from your academic advisor
  - one from a faculty member within your major
- Study Abroad Form Parts A and B from the Office of Academic Records

All application pieces must be submitted together, at the same time. Incomplete applications will not be accepted.

Return applications to:
Sarah Klucker, J.D.
Director for Leadership and Student Development
Clark Hall 114

Any approved study abroad candidates will need to complete the registration process with the Office of Academic Records before studying abroad.
McKendree University
Application for Study Abroad
Please print legibly.

Student Information
First ___________________ Middle ___________________ Last ___________________
Permanent Address ____________________________________________________________
City ___________________________ State ___________________ Zip __________________
McKendree Address ____________________________________________________________
City ___________________________ State ___________________ Zip __________________
Cell phone ( ) ___________________ Home Telephone ( ) ________________________
McKendree e-mail address ______________________________________________________
Other e-mail address __________________________________________________________
Current GPA [must be at least 2.75] _______________ Year at University ______________
Number of academic hours completed [must be at least 45] ____________________
Major ___________________________ Minor ___________________________

Name of Academic Advisor ___________________________ Telephone Number ______________

I wish to participate in the following program:

_____ The fall _______ semester only _______ The spring _______ semester only
_____ summer _______ _______ The entire ____________ school year

1st Choice University ____________________________________________________________
2nd Choice University _________________________________________________________

Parent Information
If your parents live separately, give addresses for both. Indicate an e-mail address for each parent.

Father’s Name ________________________________________________________________
Street________________________________________________________________________
City ___________________________ State _______________ Zip ______________________
Home Telephone ( ) ___________________ Business Telephone ( ) ___________________
e-mail _________________________________________________________________________

Mother’s Name ______________________________________________________________
Street________________________________________________________________________
City ___________________________ State _______________ Zip ______________________
Home Telephone ( ) ___________________ Business Telephone ( ) ___________________
Email: ______________________________________________________________________
I understand that the minimum study abroad eligibility requirements are: (1) completion of 45 undergraduate hours and a cumulative grade point average of at least 2.75 achieved by the end of the semester of the year the McKendree University Study Abroad Application is submitted, (2) good academic and judicial status, and (3) no financial and/or administrative encumbrances on my student account.

I understand and agree that, as a participant in the McKendree University Study Abroad Program, I am subject to the student conduct regulations described in the Student Handbook located at www.mckendree.edu. I further understand that attending a foreign University or university as part of the McKendree University Study Abroad Program; I am also subject to the conduct regulations of that institution.

I understand that I am subject to the laws of the host country and agree to abide by those laws. It is further understood that McKendree University may be limited in its ability to provide assistance in the event of arrest and may also institute disciplinary proceedings.

I am aware of the nature and the cost of the program and will guarantee that all financial obligations will be met. I understand that I can apply the following financial aid to help pay for my program: loans; Pell Grant and other Federal grants; ISAC and other State grants; “non-participating” McKendree aid and outside scholarships. I also understand that applicable McKendree financial assistance will only be available to me for one (1) semester. State and McKendree aid will not be available to students who choose to study abroad for more than one (1) semester or during the summer semester. However students registered for six (6) hours during the summer may qualify for Stafford or parent loans.

I understand that as a student participating in the McKendree University Study Abroad Program, I am willing to learn about the host institution’s culture and be open to new ideas even though they may be culturally challenging. I am aware that it is both inappropriate and culturally insensitive to use this time to promote religious or political agendas; further, such behavior can cause offense and potentially place me in harm’s way. I understand that I cannot expect to change the society I am visiting and as a representative of McKendree University, I should not engage in such activities. I understand that, while the United States of America respects the right of freedom of expression, this is not a universal right and may not be protected by law in some countries. Consequently, I will demonstrate a respect for the host culture even though I may not agree with all aspects of that culture, and I understand that behavior that is inconsistent with this statement may lead to my removal from the program.

I have read and understand the conditions governing my participation in McKendree University Study Abroad Program. I further understand the possible actions that will be taken should I act in a manner that is inconsistent with these conditions.

__________________________  _______________________
Student’s signature  Date

__________________________
Student’s Name - Printed
Study Abroad
Release of Information Agreement

The collection, retention, dissemination of your records and personal information is subject to federal regulations under the Family Education Rights and Privacy Act of 1974. Therefore, it is necessary for the McKendree University Study Abroad Program to obtain your permission to release information collected on the application, in your letters of recommendation, and in your transcripts. We need your agreement to the following:

I hereby release information contained in my application for study abroad, letters of recommendation, and transcripts to McKendree University’s Study Abroad Program for review and approval of my study abroad application. I grant permission for access to medical, disciplinary, and counseling files that have bearing on my application.

Enrollment in the program can be denied at any time. McKendree University complies fully with all applicable federal and state non-discrimination laws, orders, and regulations. The University is an affirmative action and equal opportunity institution and affirms its dedication to non-discrimination on the basis of race, color, religion, sex, age, sexual orientation, marital status, disability, national origin, and status as a disabled veteran in employment, programs, and services.

I have read the above paragraphs; I understand them completely and by signing below, I acknowledge my agreement to be bound by their terms as condition of my participation in the McKendree University Study Abroad Program.

___________________________________  ____________________________
Student’s Signature                  Date

___________________________________
Student’s Name – Please Print
Academic Responsibilities

**Academic**

1. Students are required to meet with both their academic advisor and the Registrar to ensure that course selection is applicable toward degree completion at McKendree University.

2. Students will not be permitted to change their academic major during the semester(s) they study abroad.

3. Students should be aware that educational systems differ throughout the world and the format, teaching methodologies, grading practices, etc. they have experienced at McKendree University may not be the same as they will experience in other systems.

4. Students are responsible for knowing the academic year calendar of the international institution they will be attending.

**Penalty for Withdrawal from the Program**

The student will be responsible for any penalties incurred due to early withdrawal from the Study Abroad Program.

I have read the above paragraphs; I understand them completely and by signing below, I acknowledge my agreement to be by their terms as condition of my participation in the McKendree University Study Abroad Program.

_________________________________        ___________________________
Student’s Signature                                           Date

_________________________________
Student’s Name – Please Print
1. IFSA/ISA will directly bill McKendree University for:
   a. McKendree tuition charges and
   b. any excess tuition charges imposed by the institution the student will be attending.

2. IFSA/ISA will directly bill the student for housing, meals, all additional fees and deposits associated with the study abroad experience.

3. The student will apply for financial aid via submission of the FAFSA Form. The student will be responsible for paying to McKendree University:
   a. McKendree tuition charges as identified in that current year’s catalog, and
   b. any excess tuition charges imposed by the institution the student will be attending.

4. Students can apply the following financial aid to help pay their study abroad expenses: loans; Pell Grant and other Federal grants; ISAC and other State grants, “non-participating” McKendree aid and outside scholarships. Applicable McKendree financial assistance will only be available to students for one semester. Any student, who continues in a study abroad program beyond one semester, will not have McKendree aid available. State and Federal aid be available to students who choose a study abroad for more than one semester. Students registered for 6 hours during the summer semester may qualify for student or parent loans.

5. Students are not able to apply the following financial aid toward their costs for the Study abroad Program, i.e. any McKendree aid award based on participation in a sport or campus activity. Likewise, aid derived from the CIC/TE programs is not available to cover any Study Abroad Program expense.

6. Students can apply for financial aid, i.e. scholarships, from the international institutions that offer them.

7. Students are reminded that, in addition to their direct education expense, they are also responsible for all other related costs, i.e. international travel, insurance, living expenses, and all other charges associated with this program.

I have read the above paragraphs; I understand them completely and by signing below, I acknowledge my agreement to be by their terms as condition of my participation in the McKendree University Study Abroad Program.

____________________________________________        __________________________
Student’s Signature                                                            Date

____________________________________________
Student’s Name – Please Print

I verify that __________________________________________ (Student’s Name) has met with me to discuss their McKendree University Financial Aid award package as it applies to toward study abroad.

____________________________________________
McKendree University Office of Financial Aid                                    Date
Medical conditions could affect your study abroad experience. If you have special medical needs or conditions, please inform us in advance using this form so that we can advise you appropriately.

Please answer the following questions honestly. This information will be provided to others as a need-to-know basis.

1. Do you have any medical, psychological or psychiatric condition(s) that could interfere with your participation in the McKendree University study abroad program? _______Yes _______No If so, please describe it (e.g., diabetes, epilepsy, asthma, eating disorder, depression, etc.).

How is this condition being treated?

Do you anticipate continuing this treatment abroad? _______Yes _______No

2. Do you have a learning disability that could interfere with your academic activities while you are participating in the study abroad program? _______Yes _______No If so, please describe.

3. Are you currently undergoing any medical or psychological treatment (including counseling) for any of the conditions described above? _______Yes _______No If yes, please describe.

4. Do you require ongoing medical attention? (e.g., injections, prescriptions). _______Yes _______No If so, please describe.

5. Do you have any restrictions on physical activity? _______Yes _______No If so, please describe.

6. Do you have any dietary restrictions, food allergies, medication allergies or other allergies? _______Yes _______No If yes, please complete the following.

I am allergic to:

How severe is this allergy?

My typical reaction when exposed is:

Treatment for my allergy is:

__________________________________________________________   __________________________________________

Name ___________________________ Date ______________________
To be completed by the applicant:

Student Name: ________________________________

Program for which student is applying: ________________________________

Reference requested from: ________________________________

Applicant’s signature ________________________________ Date __________

Under the provisions of the Family Rights and Privacy Act,

☐ I have retained my right of access to this recommendation.

☐ I have waived my right to this recommendation.

To be completed by the individual providing the reference:

The student named above is applying for the study abroad program through McKendree University and the Institute for Study Abroad or International Studies Abroad. Your candid appraisal of the student’s propensity for a successful academic experience and ability to serve as a representative of McKendree University and the United States is an important part of this application. Please note that the student has been given the option of waiving or retaining the right of access to this recommendation.

1. How long and in what capacity have you known this applicant?

2. Please assess the quality and level of the student’s academic work and his or her seriousness of purpose.

<table>
<thead>
<tr>
<th>Knowledge in area of specialization</th>
<th>Below average</th>
<th>Average</th>
<th>Above Average</th>
<th>Outstanding</th>
<th>Do not know</th>
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<tbody>
<tr>
<td>Motivation and seriousness of purpose</td>
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3. How would you judge this student’s ability to adjust easily to new or changing situations and environments?

4. What is your estimate of the applicant’s interpersonal skills, maturity and judgment of people?

5. What do you consider the applicant’s primary talents or strengths? In what areas does he/she need improvement or growth?

6. Please provide any additional comments that would aid the Study Abroad Selection Committee in the evaluation of the applicant.

7. In light of the above:
   - [ ] I strongly recommend this student.
   - [ ] I recommend this student with reservation as noted above.
   - [ ] I can not recommend this student.

Reference Information:

Name:__________________________________________________________________________________

Position:______________________________________________________________________________

Campus Address:________________________________________________________________________

Telephone: _______________________________ E-mail:_________________________________________

_________________________________________________________ Date

Thank you. Please return to Sarah Klucker, J.D., Director for Leadership and Student Development, Clark Hall 114.
To be completed by the applicant:

Student Name: 

Program for which student is applying: 

Reference requested from: 

Applicant’s signature ________________________________ Date ____________

Under the provisions of the Family Rights and Privacy Act,

☐ I have retained my right of access to this recommendation.

☐ I have waived my right to this recommendation.

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7. In light of the above:
   - [ ] I strongly recommend this student.
   - [ ] I recommend this student with reservation as noted above.
   - [ ] I cannot recommend this student.

Reference Information:

Name: 

Position: 

Campus Address 

Telephone: E-mail: 

_________________________ __________________________ 

Signature Date

Thank you. Please return to Sarah Klucker, J.D., Director for Leadership and Student Development, Clark Hall 114.
Study Abroad Program

IFSA/ISA would Direct Bill
- McKendree University
  - McKendree Tuition
  - Excess Program Tuition
- Student
  - Housing
  - Meals
  - Housing Deposit
  - Application Fee
  - Advance Deposit
  - Extra Fees

Student Pays McKendree
- McKendree Tuition
- Excess Program Tuition
- Administrative Fees – if applicable
- Airline ticket
- Housing
- Meals
- Housing Deposit
- Application Fee
- Advance Deposit
- Extra Fees

Aid Eligible for Study Abroad
- Loans
- Pell and other Federal Grants
- ISAC & other State Grants
- McKendree “Non-Participatory” Aid
- Outside Scholarships

Aid NOT Eligible for Study Abroad
- McKendree Aid dependent upon participation in some sport or campus activity
- CIC/TE Program