

LANGDALE COLLEGE OF BUSINESS, VALDOSTA STATE UNIVERSITY

KARLSRUHE UNIVERSITY OF APPLIED SCIENCES SUMMER STUDY ABROAD PROGRAM

JULY 4 – AUGUST 4, 2010

COST: \$3999

Application Form

Directions: Complete all blanks, sign the form, and give it to the program administrator, Dr. Andrew Ostapski* along with 1 passport-sized photo. Follow the links from http://www.valdosta.edu/cip/VSGroupStudyAbroadPrograms.shtml to pay your \$250 application fee (and future installments) online.

*Dept. of Management
Valdosta State University
Valdosta, GA 31698-0076

FOR OFFICE USE ONLY:

Date rec'd. _____

1 photo rec'd _____

App. fee rec'd _____ Letter _____

A. Personal Information

Name Last Name First Name Middle Name

Current Mailing Address apartment and/or street number city state zip code

Permanent Address apartment and/or street number city state zip code
(Mailings will be sent to this address after May 8, 2010.)

Phone Numbers area code + current # area code + permanent # email

Age Birth date Student Number
Month/Day/Year

Male Female

Medical Information: (List chronic conditions, allergies or other special health concerns and all prescription medications that you need.)

Emergency Contact: Name (Relationship) Phone Number
Street Number City State Zip Code

B. Passport Information

Country of Citizenship I am applying for a passport.

I have a current passport: Number Place of Issue Date of Issue Expiration Date

Name exactly as appears in passport:

C. Academic Information

College/university currently attending

Classification GPA (a minimum of 2.0 is required)
(Fr, Soph, Jr, Sr, Graduate)

Major or area of academic interest

Do you have a HOPE grant to attend college in Georgia? _____ yes _____no

D. Course Selection and Registration Information

You may take a maximum of 2 three-hour courses plus there is a required 2-hour credit lower division course titled *German Language and Culture*.

Check the course(s) you wish to take:

Morning Class ___ **International Marketing (UD)** (3 hours credit)

Afternoon Class ___ **International Management (UD)** (3 hours credit)

Late Morning **German Language and Culture (LD)** (2 hours credit) **(Required of All Program Participants)**

Arranged Time ___ **International Business (UD)** (3 hours credit)

LD = lower division courses

UD= upper division courses

(Please note that tuition is not covered in the cost of the program.)

E. Authorization and Waiver of Liability: Read and sign the following statement

I acknowledge that participation in a study abroad program involves some risk of injury, illness, or loss of personal property. I agree to release and forever discharge the institution through which I am registering for the program Valdosta State University and the Board of Regents of the University System of Georgia, its members individually, and its officers, agents, and employees, from any and all claims, demands, rights, and causes of action of whatever kind or nature, arising from and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injuries, including death, damages to property and the consequences thereof, resulting from my participation in the Summer 2010 program in Karlsruhe, Germany and related activities.

I certify that, to the best of my knowledge, I am in good health and physically capable of undertaking an intensive program of foreign study and any medical or health-related problems have been explicitly described in this application.

I further agree that I shall be subject to the supervision and authority of the faculty member in charge, and to standards of conduct stipulated by the Germany 2010 faculty, Valdosta State University, and my home institution. I further acknowledge that the supervising faculty or program director has sole authority to make decisions regarding the continued participation of any individual in the program whose conduct may necessitate disciplinary action. I understand that should I be dismissed from the program for not following the standards of conduct, I am responsible for arranging and paying for any additional costs to return home to the U.S.

I further authorize the supervising faculty or program director to obtain and provide medical treatment and/or services that I may require during the study abroad program.

Finally, I am aware that the deadline for submission of this application is February 1, 2010, and I agree to abide by the deadlines for fee payment as follows:

February 1, 2010 - deposit of \$250 (paid ASAP to reserve place) and first payment of \$1750 to cover airfare and facility deposits in Germany.
March 15, 2010 - final payment of \$1999.

I further acknowledge and accept the schedule for refunds, should I withdraw from the program, and accept the penalties associated with late withdrawal, as follows:

Withdrawal before March 1: All but \$250 will be refunded.
Withdrawal between March 1 and April 28: All but \$2000 will be refunded.
Withdrawal after April 28: No money will be refunded.

I agree to allow VSU to add the program and tuition charges for my study abroad program to my banner account and to abide by the payment deadlines listed.

Note: All withdrawals must be made in writing to the program representative in order for refunds to be processed.

Note: Students will pay excess costs associated with individual circumstances and personal requirements that deviate from standard program charges. For example, students will pay the extra costs for a Eurail Pass if their age disqualifies them from the established youth fare.

I understand that submitting an application for this study abroad program does not guarantee acceptance into the program; that candidates must meet program requirements and be approved by the study abroad advisor on your campus, and that participation is subject to availability and is on a first come, first served basis.

Signature of Applicant

Date

F. LCOBA Study Abroad Program Director Signature:* If not enrolled at VSU, please take this application to your international or study abroad advisor* on your campus for approval and signature.

I approve this student's application for the Study Abroad Program in Germany, Summer, 2010 and verify that this student has a GPA of 2.0 or higher.

Signed: _____ email: _____
(director or study abroad advisor)

(printed name) telephone: () _____

Student must be 18 years of age at the time of departure to participate.

*Students enrolled in the Langdale College of Business at Valdosta State University should obtain approval of Dr. Andrew Ostapski, Program Director. Other applicants will be directed by Dr. Ostapski to the appropriate advisor for approval.