

Application Form  
**LANGDALE COLLEGE OF BUSINESS, VALDOSTA STATE UNIVERSITY**  
KARLSRUHE UNIVERSITY OF APPLIED SCIENCES SUMMER STUDY ABROAD PROGRAM "BUSINESS IN GERMANY"  
JUNE 29 – JULY 27, 2014

**COST: \$3995**

**Directions:** Complete all blanks, sign the form, and give it to the program director, Dr. Marko Horn\*. Follow the links from <http://www.valdosta.edu/academics/academic-affairs/international-programs/dept/study-abroad/germany.php> to pay your \$250 application fee (and future installments) online. The application fee is part of the total cost.

**\*Assistant Professor of Management**

Department of Management & International Business  
Langdale College of Business  
Valdosta State University  
1500 N. Patterson Street  
Valdosta, GA 31698

**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 1, 2013)

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

Age \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Student Number # \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
Month/Day/Year

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 printed in passport: \_\_\_\_\_

**C. Academic Information**

College/university currently attending \_\_\_\_\_ Major: \_\_\_\_\_

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

Do you have a HOPE grant to attend college in Georgia? \_\_\_\_\_ yes \_\_\_\_\_ no

**D. Course Selection and Registration Information**

You may elect to enroll for a maximum of six semester credit hours selected from the following courses. It is recommended that you enroll in both courses. Circle the name of the course you want to take:

     **IB-3600 International Business and Culture (3 hours credit)**

     **ECON 3600 International Economics (3 hours credit)**

     **INTL-3170 German Language and Culture (3 hours credit)**

**(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 2014 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 2014 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 January 24, 2014, and I agree to abide by the deadlines for fee payment as follows:

<b>January 24</b>	<b>\$250 (application fee deadline)</b>
<b>February 10</b>	<b>\$1,745 (first installment)</b>
<b>March 29</b>	<b>\$2,000 (final installment)</b>

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

<b><u>Withdrawal before March 1:</u></b>	<b>All but \$250 will be refunded.</b>
<b><u>Withdrawal between March 1 and March 29:</u></b>	<b>All but \$1745 will be refunded</b>
<b><u>Withdrawal after April 1:</u></b>	<b>No money will be refunded.</b>

**\*Note: Subject to change--exact dates will be communicated to you before the end of the first withdrawal date.  
Note: All withdrawals must be made in writing to the program representative in order for refunds to be processed.**

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 campus study abroad advisor; and that participation is subject to availability and is on a first come, first served basis.

\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_  
Date

**F. Study Abroad Advisor Signature: Please take this application to your international or study abroad advisor on your campus for their approval and signature.**

Signed: \_\_\_\_\_ email: \_\_\_\_\_