



SOUTHERN VIRGINIA
UNIVERSITY

Travel Study

Application Packet

2011-2012

General Information

Last name: _____ First Name: _____ Middle Name: _____

Name of Trip: _____ Trip Advisor: _____ Date of Trip: _____

Gender (*circle one*): Male Female Student ID (*optional*): _____

Year in School (*circle one*): Freshman Sophomore Junior Senior
(Credit hour status) (Less than 26) (26-55) (56-87) (88-above)

Mailing Address: _____ (*address*) _____ (*city*) _____ (*SI*) _____ (*zip*)

Permanent Address: _____ (*address*) _____ (*city*) _____ (*SI*) _____ (*zip*)

Primary Phone: (____) ____ - ____ Is this a cell phone? Yes or No

Secondary Phone: (____) ____ - ____ Is this a cell phone? Yes or No

SVU E-Mail: _____ Alternate (*optional*) _____

(We will send all official Travel Study communication, including your acceptance, to your Southern Virginia email address. You must check for forwarded messages from this email account.)

Are you a U.S. Citizen? (*circle*) Yes No

If no, when does your visa expire (mm/dd/yyyy): _____ Passport Number: _____

Application/Participation Checklist

The following is your to-do list to complete your application and be officially accepted to a Travel Study program. Until all of this information is completed and reviewed by the Travel Study office, you are not considered an official participant in any program. We will send an email to your Southern Virginia student account confirming your acceptance after the following items have been completed and reviewed by the Travel Study Program Advisor, Dean of Students, Registrar and the Director of Travel Study.

- ❖ Return Student Financial Services:
 - Intent to Travel form
 - Initial deposit of \$200
- ❖ Return Application to Travel Study Office with signed copies of the following:
 - Participation agreement
 - Liability Waiver
 - Health assessment
 - Emergency Contact Information/ References
 - Travel Study Conduct Agreement
 - Photo Release form
- ❖ Meet with Trip Advisor:
 - Review and sign conduct agreement
 - Register for courses
- ❖ Meet with Student Financial Services
- ❖ Attach to Application:
 - Copy of passport



Participation/Application Agreement

I accept, understand and agree to abide by the conditions of the Participation Agreement outlined in this form. If I do not comply with the following conditions, the Southern Virginia University Travel Study office will withdraw approval for my participation.

1. I will participate in any and all orientation programs (including a 1 credit pre-trip preparation course) provided by my program advisor and will be held responsible for the information presented there.
2. I will provide the Travel Study office with a copy of my passport.
3. Southern Virginia reserves the right to modify, change, alter and/or cancel the program, classes, schedules, and/or itineraries based on unforeseen circumstances such as health, safety, political, and/or economic risks at the study site. If my program is terminated or modified, Southern Virginia is not liable for nonrefundable travel costs.
4. My travel study may be terminated early by Southern Virginia University if I fail to attend classes, fail to maintain minimum academic standards, fail to uphold the Southern Virginia Honor Code or am found in violation of the laws or regulation of my host country.
5. I agree to pay the full program cost to Southern Virginia University according to the payment schedule attached. I understand that failure to pay in full prior to departure will result in my termination from the program and loss of all non-refundable payments.
6. I understand that in case of a potential risk to me or to the Travel Study program, the Travel Study office or my program advisor will contact my emergency contacts.
7. I give the Southern Virginia Travel Study permission to order and release my student records and transcript to parties directly involved with the acceptance and processing of my application.
8. I will be a currently matriculated student at Southern Virginia University in good academic standing at the time of travel. I understand that if I am placed on academic probation at any time prior to or during my Travel Study program that my program may be terminated.
9. I understand that any misrepresentations or misstatements of fact in this application could result in expulsion or the termination of my Travel Study.

Cancellation Policy

1. If I decide not to participate in the program, I will inform the Travel Study office and program advisor in **writing** of my decision as soon as possible.
2. \$50 of the application fee is non-refundable. If I cancel my placement more than two weeks after declaring my intent to travel, I will forfeit my full deposit of \$200.
3. If I cancel my participation in the program after the first payment is due, I understand that because of necessary program costs prior to departure, a refund will not be returned to me unless the program is full and a student on the wait list can take my space and has paid the deposits and payment for the program.
4. In the event that Southern Virginia Travel Study cancels a program for academic, personnel or financial reasons, students will be reimbursed for all payments and deposits made toward their travel program. However in the event that Travel Study must cancel a travel program because of political instability of the host country, terrorism, acts of god, or travel advisories, warnings or restrictions imposed by the US government, students will receive a reimbursement through voucher for future travel or as a credit to their Southern Virginia student account. Graduating or non-returning students may apply to receive up to 80% reimbursement.

Signature: _____ Date: _____

Parent/Guardian Signature (if participant is under 18): _____ Date: _____

ASSUMPTION OF RISK AND GENERAL RELEASE FORM

***THIS IS A RELEASE OF LEGAL RIGHTS -
READ AND UNDERSTAND BEFORE SIGNING***

I am a participant in a Southern Virginia University Travel Study Program _____ (name of trip). I have chosen to undertake this trip voluntarily. I was not required to travel to a foreign country as a condition for receiving my degree. This agreement confirms my understanding of the following:

1. Risks of International Travel: I understand that participation in the travel study and international travel involves risks not found in study at SVU. These include without limitation risks involved in traveling to and within, and returning from, international locations; foreign political, legal, medical, social and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; and local weather conditions. The country or countries to which I will travel may have health and safety standards substantially below those enjoyed in the United States, and I recognize that I may be subjected to potential risks, illnesses, injuries and even death. I have made my own investigation of these risks, understand these risks and assume them knowingly and willingly.

I also acknowledge that in working, living and traveling in cities abroad, I may experience problems associated with urban living, including increased crime(which includes kidnapping), pollution, high population density or standards of living and health standards that are not equivalent to life in the United States. I will take every precaution to safeguard my health and to protect my personal belongings from damage or theft. I acknowledge that SVU recommends that I never travel alone, particularly at night. Being alone, especially at night, may present additional danger to my safety and well being. I have read and understood the U.S. Department of State Consular Information Sheet about the country or countries to which I am traveling (available on the State Department website at <http://travel.state.gov>).

2. Health Insurance: Medical Care. I carry valid and current medical insurance and have a valid insurance identity card to bring. I have determined that this insurance is adequate to cover injuries or illnesses that I may sustain while participating in travel study. I will be solely responsible for payment in full of all costs of medical care I may receive out of country.

3. Standards of Conduct: I recognize that I assume an important personal obligation to conduct myself in a manner compatible with local laws and regulations, and with Southern Virginia University's honor code (www.svu.edu/honorcode). I promise to act responsibly and will become informed of, and will abide by, all such laws, regulations and standards. I will comply with SVU's policies, standards and instructions for student behavior. I agree that SVU has the right to enforce the standards of conduct described above.

4. Travel Arrangements: I understand that Southern Virginia University does not represent or act as an agent for, and cannot control the acts or omissions of, any host family, employer, transportation carrier, hotel, tour organizer or other provider of food, goods or services involved in the travel study. I understand that SVU is not responsible for matters that are beyond its control, and that it cannot warrant the safety or convenience of the circumstances under which I will be living or working.

5. GENERAL RELEASE: Knowing the risks described above, I agree, on behalf of my family, heirs and personal representative(s), to assume all the risks and responsibilities surrounding my travel study. To the maximum extent permitted by law, I hold harmless and agree to indemnify Southern Virginia University, and its trustees, directors, faculty, staff, representatives, employees and agents, from and against any present or future claim, loss or liability for injury to person or property which I may suffer, or

for which I may be liable to any other person, related to my participation in travel study (including periods in transit to or from my destination), resulting from any cause, including but not limited to ordinary or gross negligence.

I certify that I am age 18 or older. I have carefully read and freely signed this Assumption of Risk and General Release Form. I understand and agree that no oral or written representations can or will alter the contents of this document. I agree that this agreement shall be governed by the laws of the Commonwealth of Virginia, which shall be the forum for any lawsuits filed under or incident to this agreement or SVU travel study.

Signed: _____ Date: _____

Student Name (print) _____



Personal Health Assessment

Part of the application process for a Southern Virginia Travel Study program is an honest self- assessment of your overall health. Travel can be physically and emotionally very stressful. While traveling, you will be expected to keep a much more rigorous daily schedule than you do while taking classes and living on campus. You will also have limited control over some aspects of your daily routine and activities. Going on a trip, while dealing with serious physical limitations, will prevent you from fully enjoying your travel experience and create undue restrictions for the group as a whole.

Your honest evaluation of your health will help both you and your trip advisor determine your best course of action while preparing to go abroad. This form will be treated as confidential and only shared with the professionals overseeing your travel program.

Please circle “Yes” or “No”

- | | | |
|--|-----|----|
| 1) Do you have any pre-existing medical and/or psychological conditions? | Yes | No |
| 2) Do you currently see a doctor or counselor on a regular basis? | Yes | No |
| 3) Do you have dietary restrictions | Yes | No |
| 4) Do you have any allergies? | Yes | No |
| 5) Do you have any physical disabilities? | Yes | No |
| 6) Have you ever had a major illness? | Yes | No |
| 7) Have you ever had a major surgery? | Yes | No |
| 8) Have you been hospitalized in the last year? | Yes | No |
| 9) Have you ever been treated for drug or alcohol addiction? | Yes | No |
| 10) Have you ever been treated for a mental or emotional disorder? | Yes | No |
| 11) Can you walk five miles without difficulty? | Yes | No |
| 12) Can you walk up at least three flights of steps without difficulty? | Yes | No |
| 13) Do you take any medications? | Yes | No |
| 14) Do you have any medical or emotional conditions which may worsen or be triggered as a result of stress, time change, dietary changes, strenuous walking or hiking etc? | Yes | No |
| 15) Do you have any other physical or mental health concerns that you feel a program director should be aware of prior to travel? | Yes | No |

If you answered "yes" to any of the above questions, please explain in detail below.

If you suffer from any allergies requiring treatment, please list them below.

Allergies (Circle)

- NONE
- Food or environmental Reaction Treatment, if exposed

- Medication Reaction Treatment, if exposed

- Other Reaction Treatment, if exposed

Please list your current medications here.

Medication

<u>Name of Medication</u>	<u>Purpose</u>	<u>Dosage</u>
_____	_____	_____
_____	_____	_____

By signing below, I certify that the above information is true to the best of my knowledge. I understand that false statements could lead to a termination of my Travel Study. I also acknowledge the following:

I, and my parents or guardians, agree to release and hold harmless Southern Virginia University and its employees and agents from any claims arising out of the provision of medical care while I am participating in Travel Study.

I understand and agree that this form will be released to Southern Virginia University and its agents.

If my parents or guardians have not signed this form, I represent and certify that I am not a minor.

Signature of Applicant: _____

date:

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

date:



Emergency Contacts

Southern Virginia University defines an emergency as any potential risk to health, safety, or freedom as well as potential medical, natural, social, or political crisis. In order to provide assistance in an emergency, we ask that you provide us with accurate and continually updated information for your Emergency Contacts. The Travel Study office will notify the primary contact of this designation. You should keep these people informed of the details of your program as well as travel plans before and after your program.

Primary contact Name(s): _____ Relationship: _____

Day phone: _____ Evening phone: _____

Email: _____ Secondary E-mail: _____

Address: _____

Secondary contact name(s): _____ Relationship: _____

Day phone: _____ Evening Phone: _____

Email: _____ Secondary E-mail: _____

Address: _____

May the above individuals be contacted to assist with financial and administrative business on your behalf for the duration of your study abroad program? Yes No

If you parents are not listed able, may we release information to them? Yes No

References

A student must list three individuals that the Travel Study office can contact in order to do background checks of the applicant. This list should not include parents, immediate or distant family, friends, and associates/peers (classmates, co workers, etc.). These individuals are people with community standing, and may include, but not excluded to ecclesiastical leaders, employers, professors, and local leaders.

Name	Address	Phone	Email	Relationship/Position

- ❖ Upon completion of this packet and formal interview with trip advisor, applicant will receive confirmation of acceptance into the Travel Study program in their Southern Virginia email account. He/ She is therefore responsible for financial payment and trip requirements.

Travel Study Conduct Agreement

- ❖ The final part of your application to go abroad with Southern Virginia is to review this conduct agreement with your trip advisor.

Group travel is a tremendously rewarding experience. You will have the opportunity to make friends for life and heighten the experience by sharing it with those of similar interests and backgrounds. You will also be lead by a well prepared and knowledgeable trip advisor whose expertise in his/her field of study will enrich your experience immeasurably. In return each member of the group will need to agree to a few simple guidelines.

1) **Safety.**

You will receive instruction regarding safety precautions that should be taken while on you Travel Study program. As a rule you should always be in groups of three or more. Dating is not permitted during Travel study.

2) **The Southern Virginia Honor Code applies while abroad.**

As with all academic programs at Southern Virginia, Travel Study program participants will strictly keep the honor code, with special attention to local customs as outlined individual program advisors. This includes appropriate dress and grooming.

3) **Participate fully.**

All participants in Travel Study are expected to follow the daily itinerary outlined by the program advisor and attend all classes and meetings held while abroad.

4) **Be on time/ Be flexible**

You will have various meeting times each day while traveling. **Bring a watch**; having the courtesy to be on time makes all the difference during group travel. However even the best travel plans never go quite perfectly. **Flexibility** and a sense of humor are the keys to a good Travel Study experience.

5) **Minimize drama.**

Personality conflicts, communication problems, and other disagreements are inevitable in any group. Overlook whatever you can. Think of others. Make peace. If you have persistent or serious concerns about the behavior of others, report them to the trip advisor.

I have read and will abide by the Travel Study Conduct Agreement.

Student Signature: _____ Date: _____

I have reviewed the Travel Study Conduct Agreement with the above student.

Trip Advisor: _____ Date: _____

Southern Virginia University Photo Release Form

Participant's name _____

I hereby authorize Southern Virginia University to publish the photographs taken of me, and my name, for use in the university's publication, advertisements, website, etc.

I acknowledge that since my participation in publications, advertisements and websites produced by Southern Virginia is voluntary, I will receive no financial compensation.

You will have a number of photographs taken during your travel study. Many of these will be published to the web by your friends through social media sites, etc. Also, out of the tens of thousands of Travel Study photos taken each year, our office will pick a handful to use in our publications and on the website. Signing this photo release form will allow us to use your image for those purposes.

We also hope you will share the photos you've taken with us after your trip. If we choose one of the photos you have taken for publication, we will always make contact, through email, asking for your permission and will give credit to you for its use.

I further agree that my participation in any publication, advertisement and website produced by Southern Virginia University confers upon me no rights of ownership whatsoever. I release the university, its contractors and its employees from liability for any claims by me or any third party in connection with my participation.

Signature: _____ Date _____

Permanent Mailing Address:

Email Address:

Phone: