

EUROPEAN STUDIES 2010

APPLICATION FOR ADMISSION

1. Name in full: (as it appears on Passport) _____
LAST FIRST MIDDLE PREFER TO BE CALLED
Social Security Number _____ Date of birth _____ Sex: M F
2. Home Address: _____
NUMBER, STREET, CITY, STATE, ZIP
Home telephone number _____ E-Mail Address _____
3. College Address: _____
College telephone number _____ College ID number _____
(IF KNOWN)
4. Father's Name: _____ E-Mail address _____
Address if different from home address: _____

Home telephone _____ Work telephone _____
5. Mother's Name: _____ Email address _____
Address if different from home address _____

Home telephone _____ Work telephone _____
6. Person responsible for payment of fees _____ Relationship _____
Address if different from home address _____
7. Emergency contact: Father Mother (circle) Other: Name _____
Telephone number _____
8. Institutions of collegiate rank attended: _____
Present institution: _____ Dates of attendance _____
9. Area of academic concentration (major): _____
10. Option Choice: Ancient Greece and Rome _____ Western Europe _____
(Indicate options in order of preference. If interested in one option only, leave other space blank.)
11. If you wish to participate in the Optional Week-end Excursion to Dublin (additional \$845.00), please indicate here: Yes _____ No _____
12. The applicant must be endorsed for seriousness of academic purpose, social maturity, and emotional stability by the Director of International Programs and the Dean of Students.
Approved: _____ Title _____
Approved: _____ Title _____
13. Now receiving Financial Assistance at Rhodes College or The University of the South: Yes _____ No _____
If yes, describe: _____
(Use additional page if necessary.)
14. This application should be accompanied by the following:
(a) FOUR recent 2" x 2" photographs of passport quality.
(b) An official transcript.
(c) A deposit of \$300 (refundable in the event of non acceptance).
(d) Photocopy of pages 1 & 2 of passport.
(e) Typed paragraph explaining how applicant hopes to benefit from participating.

After completion, this application should be returned to:

The Office of European Studies, Burrow Hall, Lower Level, Rhodes College, 2000 N. Parkway, Memphis, Tennessee 38112.

PLEASE SIGN THE WAIVER OF RESPONSIBILITY ON THE BACK OF THIS APPLICATION.

STATEMENT OF RESPONSIBILITY AND ASSUMPTION OF RISK REGARDING EUROPEAN STUDIES

The undersigned is a student seeking enrollment in European Studies (hereinafter referred to as "E.S." and the "program"). In consideration for acceptance into the program, the undersigned agrees to the obligations and considerations set forth herein. Reference in these conditions to European Studies shall include all officers, trustees, employees, agents and related parties of European Studies, individually and collectively, as well as those of Rhodes College and The University of the South. Reference in these conditions to "participants" shall include all students who have been accepted into the program. All reference herein to "the parents" of the participants shall include the legal guardians or other adults responsible for the applicant.

- Behavioral Responsibilities.** All participants will at all times comply with rules, standards, and instructions for student behavior set forth by E.S. and Lincoln College. The program reserves the right to enforce appropriate standards of conduct and specifically reserves the right to terminate participation in the program by anyone who fails to maintain these standards or for any action or conduct which E.S. considers to be incompatible with the interests, harmony, comfort, and welfare of other participants. It is important that participants conduct themselves in an entirely honorable manner during their association with this program, and avoid any act that might reasonably be construed as lying, cheating, or stealing.
- Deposit.** E.S. reserves the right to accept or reject any proposed participant, and the receipt for the deposit does not constitute acceptance to the program. An application is deemed rejected or accepted on the dispatch of a notification of rejection or acceptance. If an application is rejected for any reason, the deposit will be refunded in full.
- Release of Liability.** The undersigned releases E.S., any tour organizer or arranger, any host college or hostel, and all employees and agents of the foregoing, from any and all claims, demands, or suits for personal injury, death, property damage, loss, expenses, or other damages, of whatever nature and howsoever caused, arising out of or related in any way to the undersigned's participation in the program including, but not limited to, claims or damages resulting from: delay; the criminal acts of others; the use of any vehicle; strike; war; a threat or act of terrorism; weather; sickness; quarantine; any governmental restriction or regulation; or any act or omission by any steamship line, airline, railroad, ferry, coachline, taxi service, hotel, restaurant, college, or any other person. E.S. is not responsible for the welfare of participants during periods of independent travel. Participants are urged to have personal insurance for such contingencies.
- Academic Responsibility.** For the satisfactory completion of the course for credit, participants are expected to attend all lectures, seminars, and required excursions and to complete all assignments and examinations in a timely way.
- Photos.** Participants consent to the use of their photographs, comments, and photographic likenesses by E.S. for publicity purposes insofar as E.S. may in its discretion think fit.
- Health and Safety.** E.S. reserves the right to take whatever action it may consider warranted by circumstances relating to the health and safety of the participants, and the undersigned hereby releases E.S. from any liability for such decisions or actions.
- Medical Services.** The participant hereby authorizes E.S. and its agents and employees at their discretion without obtaining any further consent to arrange such medical services and treatment as may be deemed necessary for the participants at the sole risk and expense of the participants or their parents. If deemed necessary or desirable by E.S., any participant may be returned to the United States by commercial airline or other means for medical treatment at the risk and expense of the participant or parents. Participants are strongly advised to have an insurance policy to cover such risks.
- Property Damage.** Should a participant damage or lose property belonging to E.S. or any other college, hotel, or hostel, or to any individual associated with any of the foregoing, the participant agrees to indemnify the injured party and to accept such penalty as the Dean may reasonably impose. The participant also agrees to discharge all other indebtedness or obligations to E.S. before the conclusion of the program and understands that a failure to do so may result in the withholding of credit and the payment of administrative fees for the subsequent discharge of these obligations.
- Indemnity.** The participant agrees to assume the liability for, and to indemnify and defend E.S. and its agents from, any and all loss, liability, claims, damages, or expenses arising, either wholly or in part, out of the actions or omissions of the participant.
- Substance Abuse Policy.** The sale, distribution, use or possession of a controlled drug or substance, or unauthorized prescription while a participant on this program represents a serious breach of conduct and will result in expulsion from the program and notification of the appropriate officials of the parent institution and / or others who may be concerned. Also, to be present, though not a participant, during a violation of this policy will in itself be deemed reprehensible and subject to penalty.
- Termination Policy.** Should a student be compelled to withdraw for good reason before the beginning of the semester, the Office of European Studies will undertake to determine what portion of the room, board and travel may be recoverable, bearing in mind that arrangements for travel abroad must be secured well in advance with full or substantial partial payment. After instruction has begun, a *pro rata* refund of board only may be allowable, at the discretion of the Office of E.S. If any participant should have his or her participation terminated, then E.S. shall have the right to require the participant to quit the program without refund of fees.
- Travel Arrangements.** E.S. will endeavor to adhere to all arrangements made but nevertheless reserves the right to change or alter any arrangement of location or content of the program or travel arrangements should E.S. deem such alteration necessary.
- Cancellation Policy.** In the event of cancellation of an entire session of this program before commencement of the program, all monies paid to E.S. prior to that time will be refunded. Should an unavoidable event such as epidemic, civil unrest, or the threat of terrorist activity result in a partial cancellation, a *pro rata* refund of all fees, together with an appropriate evaluation of academic credit, will follow. These actions will terminate any further liability on the part of E.S.
- Document Responsibility.** No responsibility is accepted by E.S. for failure by participants to carry the relevant passports, visas, tickets, or other documents required for the purpose of travel or for their loss or replacement.
- Fee Payments.** The comprehensive fee for the sixteen-week semester, including all services, benefits, and instruction described in the official notice of E.S., is \$22,985.00. Students participating in the Optional Week-end Excursion to Dublin pay an additional \$740. On application the student pays a non-refundable \$300 deposit. Subsequently, fees become payable incrementally on or before the following dates: March 15, \$11,492.50 (\$11,862.00 including excursion) and May 15, \$11,492.50 (\$11,862.00 including excursion). All payments, including the deposit, should be made payable to European Studies and sent directly to the Office of European Studies in Memphis. That office will also bill and receipt the above increments in a timely way.

The undersigned acknowledges that he/she is above the age of 18, that he/she has read the above statement and agrees to the conditions set forth above.

WITNESS:

PRINT NAME

DATE

SIGNATURE