### STUDY AWAY APPLICATION – UNIVERSITY OF EAST ANGLIA EXCHANGE

Bennington Application Deadlines: The Bennington Study Away Application for the University of East Anglia (UEA) exchange is due September 15 for spring term study away and April 15 for fall and academic year study away. You may return your completed Bennington application to the Office of the Provost and Dean.

<u>Program Provider Application Deadlines</u>: Once your Bennington Application to Study Away has been approved, you can submit your application to UEA. Applications are made <u>online</u> through the UEA website. Your UEA application is due October 15 for the spring term and June 1 for the fall term and full year. You are responsible for collecting and submitting all materials to UEA. For Bennington transcripts, please fill out a transcript request form and make sure that it will be sent well in advance of UEA's application deadline.

Ch	ecklist for filling out the application:
	Student Information Form
	<b>Study Away Essay</b> : You will need to have a Plan meeting the term before you study away. To prepare for this meeting, you will need to submit a Plan essay. Your essay should focus on your reasons for studying at UEA, the courses you plan to pursue, and most importantly, how this work will support, enhance, or inform you studies at Bennington. <b>Please attach a copy of this essay to your Study Away Application.</b>
	<b>Proposed Course of Study Form</b> : Complete this form to the best of your ability. It would be a good idea to bring it with you when you meet your Faculty Advisor and Plan committee members. Visit UEA's <u>Visiting Student Module Catalog</u> to plan your course of study. You should plan to register for 60 UEA credits, which equals 15 Bennington credits.
	<b>Financial Responsibility Agreement</b> : Outlined in this form are approximate expenses for one term of study at UEA that are not included in the exchange agreement between Bennington and UEA. Exchange participants will pay tuition and other mandatory fees to Bennington College and will pay housing fees to UEA. Each student is responsible for providing his/her own meals, transportation, passport expenses, excess baggage shipment and storage, independent travel, personal expenses, and books, as well as living expenses during extended academic recess (i.e. holidays, winter and spring break, etc.).
	<b>Declaration of Agreement</b> : Please read carefully and sign. <b>Note</b> : a parent's or guardian's signature is also required.
	<b>Assumption of Risk Form:</b> Read and carefully complete the Study Abroad Acknowledgement and Assumption of Risks and Release Agreement. <b>Note:</b> Parent or guardian signatures are required.
	<b>Passport:</b> Do you have a passport? Check it. Is it expired or will it expire while you're away? Be sure to start the passport application process early whether you're applying for a passport for the first time or you need to renew. Attach a copy of the photo page of your passport to your Bennington Study Away Application.
	<b>Emergency Contact Form:</b> Complete the attached Emergency Contact Information form and submit it with your Bennington Study Away Application.
	<b>Consortium Form</b> : If you intend to transfer federal financial aid to UEA, you will need to notify Bennington's Financial Aid Office and fill out this form once you've been accepted to a program and your Bennington Study Away Application has been approved. The Financial Aid Consortium Form and Checklist can be found on the Forms tab of your My Financial Aid Page.

### UNIVERSITY OF EAST ANGLIA EXCHANGE/ STUDENT INFORMATION FORM

Student's Full Name:			
Current term at Bennington (3 <sup>rd</sup> , 4 <sup>th</sup> , etc.):			
Email (non-Bennington):		Phone:	
Are you a U.S. Citizen: ☐ Yes ☐ No			
May we release your name and email to poter	ntial study abroad part	icipants?	
□ Yes □ No			
Academic term away (term and year):			
Permanent (H	lome) Address Inform	ation:	
Address:			
City:	State:	Zip:	
Country:			
Telephone:	Email:		
Faculty Advisor preferences when you return:  1			
2			
Student requesting exchange (please print): _			
Student requesting exchange (signature):		Date:	

In order to be approved for an exchange, students must be in Good Academic and Disciplinary Standing and have approval from their Faculty Advisor, plan committee, and the Office of the Provost and Dean. To re-enter, you must apply in writing to the Office of the Provost and Dean by May 1 for the fall term and November 1 for the spring term.

### UNIVERSITY OF EAST ANGLIA EXCHANGE/ PROPOSED COURSE OF STUDY

Na	me of Student:			
<u>Ch</u>	eck each box when complete:			
	Fill in course information about the class course availability may be limited, so be your course selections may not be finalize course schedule to your Faculty Advisor	sure to include alternazed until you're away.	nte course selections. <b>Please be sure to en</b>	We know that
	Discuss your potential course selections	with your Faculty Adv	visor and Plan comm	ittee members.
	You should enroll in 60 University of Ea Bennington College credits.	st Anglia credits per te	erm, which is the equ	ivalent of 15
C	ourse Title	Department	Language of Instruction	US Credits
_				
			Total Credi	

# UNIVERSITY OF EAST ANGLIA EXCHANGE / FINANCIAL RESPONSIBILITY AGREEMENT

Exchange participants will pay tuition and other mandatory fees to Bennington College and will pay housing fees to UEA. Each student is responsible for providing his/her own transportation, meals, passport expenses, excess baggage shipment and storage, independent travel, personal expenses, and books, as well as living expenses during extended academic recess (i.e. holidays, winter and spring break, etc.)

Outlined below are *approximate* expenses for one term of study at UEA that are NOT included in the exchange agreement between Bennington and UEA. Please note that this total is an average estimate of costs and is based on the exchange rate at the time of this application update.

#### **Estimated Costs**

	<u>Fall 2016</u>	<u>Spring 2017</u>
Flights	\$1,300	\$1,300
Accommodations	\$1,475-\$3,000	\$2,514-\$5,116
Refundable housing deposit	\$132-\$242	\$112-\$229
Meals	\$1,520	\$2,360
Living Expenses	\$1,090	\$1,500
Miscellaneous	\$1,100	\$1,100
Total estimated expenses	\$6,617-\$8,252	\$8,886-\$11,605

For a details of estimated expenses, including a number of accommodation options, please visit <a href="https://www.uea.ac.uk/study/study-abroad/incoming/financial-information">https://www.uea.ac.uk/study/study-abroad/incoming/financial-information</a>.

If I am selected to participate in the exchange program, I understand that I will be financially responsible for all additional expenses incurred during my time at University of East Anglia and I am prepared to cover these costs.

Student Name:	 	 
Student Signature:	 	 
Parent Name:	 	 
Parent Signature:		

# UNIVERSITY OF EAST ANGLIA EXCHANGE / DECLARATION OF AGREEMENT

- Studying abroad is a privilege that is available to students who have demonstrated the ability to adjust academically and emotionally to college, and who are ready to benefit from the challenges of off-campus study. In order for students to receive and maintain approval for study away, they must be in Good Academic and Disciplinary Standing and have approval from their advisor, plan committee, and the Office of the Provost and Dean.
- Students must enroll in the equivalent of 12 Bennington credits (minimum) to maintain full-time student status
  while abroad.
- If students do not enroll in and successfully complete a full-time load of classes while away, their academic standing may be in jeopardy when they return.
- Transfer credit will be awarded for grades of full 'C' or above received on an official transcript.
- I understand that it is my responsibility to request an official transcript from UEA and that an official transcript must be received in order for credits to be transferred. I understand that a provisional report can be used to verify credits earned until an official transcript is available.
- Consortium Students (students who are applying federal financial aid to the cost of their program) understand
  that eligibility for financial aid cannot be determined until verification of credits completed is received. If no
  credits have been earned during a term of consortium, students will likely be placed on academic/financial aid
  warning.
- Students studying away for a full year must arrange to have a transcript/provisional report sent to Bennington after each term/semester. If a transcript/provisional report is not received verifying completion of credits, financial aid cannot be released for the following term.
- Consortium Students must successfully complete a full-time course load with grades of C or above. Failure to do so will impact financial aid eligibility for the coming term.

I,	, have read and understand the above statements.
Student's signature	Date:
I,	, have read and understand the above statements.
Parent's signature	Date

# UNIVERSITY OF EAST ANGLIA EXCHANGE / STUDY AWAY ACKNOWLEDGEMENT AND ASSUMPTION OF RISKS AND RELEASE AGREEMENT

This is a release of legal rights; please review carefully and understand before signing. Please keep a copy for your records.

Name of Student:				
Program Abroad:			<del></del>	
Country:	Term/Year Abroad:			
In consideration and as a condition of Bennir program (the "Program"), I hereby agree to t	0 11	g my partio	cipation in the abov	e study abroad
1. Understanding the Terms of Bennington	on College's Approval:			
I have read and understand the Study Abroa	d guidelines outlined i	n the <i>Benni</i> i	ngton College Study	Away Application.
I also understand that Bennington College's College's responsibility for any aspects of the				
I understand that should I change my Progra Agreement still apply.	nm of study from that li	sted above,	the terms and con	ditions of this
Matters of academic credit will be evaluated Program due to program cancellation or for a in the Program. I agree that in the event that for any other reason, it is my responsibility to sponsor.	any other reason, I may : I am unable to comple	not receive te the Prog	e academic credit for ram, due to progra	or my participation m cancellation or
2. Medical Circumstances:				
Are there any physical or mental health circu affect your study abroad experience?	imstances about which <b>Yes</b>	Benningtor <b>No</b>	n College should be (circle one)	e aware that may
If there are any physical or mental health circ and agree that it is in my best interest to disc	•		•	
In addition, if appropriate I should discuss the	ne situation with the Be	nnington C	College Academic S	ervices person in

#### 3. Risks of Travel and Studying Abroad:

charge of off-campus study.

I understand and acknowledge that participation in the Program may involve risks not found in study at Bennington College's campus. I understand and acknowledge that these may include, but are not limited to, risks involved in and from: traveling to and within, and returning from, one or more foreign countries; different political, legal, social, law enforcement, and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; different standards as to the availability and provision of medical care; and different weather conditions.

I also understand and acknowledge that while participating in the Program and living abroad I may experience risks and/or differences relating to educational systems, academic expectations, recognition of civil rights, lack of accessibility and accommodations for persons with disabilities, alcohol and drug use, relationships and gender issues.

I have made my own inquiry and investigation into such risks and/or differences, and am willing to accept them as a condition of my participation in the Program. I acknowledge that my participation in the Program is wholly voluntary.

I understand and acknowledge that Bennington College does not administer this Program, and Bennington College does not represent or act as an agent for, and cannot control the acts or omissions of, any host institution, host family, transportation carrier, place of lodging, tour organizer or other provider of goods and services in connection with the Program.

I further understand that Bennington College has not made any investigation into the health, safety, and security conditions at either the Program site or the countries in which I will be traveling. Nor has Bennington College investigated the quality or suitability of any housing or transportation providers that I may use.

#### 4. Release of Liability:

Having examined and understood the above, I, individually, and on behalf of my heirs, executors, administrators, personal representatives, and assigns, hereby release, acquit, waive, forever discharge, and covenant not to sue, to the fullest extent permitted by law, Bennington College, its trustees, directors, officers, faculty, employees, agents, volunteers, and representatives, from any and all actions, causes of action, suits, claims, damages, judgments, liabilities, demands, expenses and costs (including attorneys' fees), or other losses, of any kind whatsoever, without limitation, which arise out of, result from, occur during, or are in any way connected, in any manner, with my participation in the Program, the use of facilities, equipment, or services in association with my participation in the Program, and/or any related or independent travel or activities, including, but not limited to, claims for damage to or loss of property, consequential damages, violations of civil rights, personal illness, injury or death, that I may have or which may hereafter accrue to me.

#### 5. Statement of Indemnification:

I, individually, and on behalf of my heirs, executors, administrators, personal representatives, and assigns, agree to indemnify, defend, and hold harmless Bennington College, its trustees, directors, officers, faculty, employees, agents, volunteers, and representatives, from any and all liability, loss, damage, cost or expense (including attorneys' fees) that they or any of them incur or sustain as a result of any actions, causes of action, suits, claims, judgments or demands, which arise out of, result from, occur during, or are in any way connected to, in any manner, my acts or omissions during my participation in the Program, the use of facilities, equipment, or services in association with my participation in the Program, and/or any related or independent travel or activities.

#### 6. Governing Law & Severability:

I agree that if any portion of this Acknowledgement and Assumption of Risks and Release Agreement is deemed unenforceable, all other provisions will remain in full force and effect. I understand and agree that no oral representations or statements by Bennington College or its representatives will effectively alter the acknowledgements, agreements and representations stated above. This agreement shall be governed by the laws of the State of Vermont, which shall be the forum for any lawsuits filed under or incident to this Agreement or the Program.

#### 7. Agreement:

I HAVE CAREFULLY REVIEWED AND UNDERSTOOD THIS ACKNOWLEDGEMENT AND ASSUMPTION OF RISKS AND RELEASE AGREEMENT AND I HEREBY AFFIRM MY AGREEMENT TO ITS TERMS AS A CONDITION OF MY PARTICIPATION IN THE PROGRAM. I AFFIRM THAT I AM 18 YEARS OF AGE OR OLDER.

### IMPORTANT - READ ENTIRE AGREEMENT BEFORE SIGNING

Student signature:		
Date:	day/month/year	
Name Printed:		
Address:		
Phone:		
Witness:		
Witness Name Printed:		
Address:		
Both parents or guardians	must sign when applicable.	
Parent Signature:	Parent Signature:	
Date:day/month/year	Date:	
Name Printed:		•
Address:		
Phone:	Phone:	
Witness:	Witness:	
Witness Name Printed:	Witness Name Printed:	
Address:	Address:	
Signatures need not be nota	rized but must be witnessed.	

# UNIVERSITY OF EAST ANGLIA EXCHANGE / EMERGENCY CONTACT INFORMATION

I understand that in the case of an emergency, Bennington College officials may notify my emergency contact(s).

Signature	Date
Please provide your information.	
Name:	Term Away:
Permanent Address:	
Cell Phone:	Home Phone:
1st Emergency Contact:	Homo Phono:
	Home Phone:
Work Phone:Address (please provide physical	
2 <sup>nd</sup> Emergency Contact:	
Relationship:	Home Phone:
	Cell Phone:
Address (please provide physical	address, not PO Box):
Email Address:	

### TRANSCRIPT REQUEST FORM

In order to request a transcript, please complete the following steps:

Complete, sign, and mail this Transcript Request Form to:

Office of the Registrar

Bennington College

One College Drive

Bennington, Vermont 05201

**or** you may fax the form to 802-440-4876.

#### Please note:

- Transcripts will not be issued if a financial obligation to the College exists.
- Allow two weeks from date of receipt for the request to be processed.

First name:	M	iddle initial:		Last name:
Full name while at Benni	ngton:			
Address:				
City:		State: _		Zip:
Telephone:Weekdays, between	n 9:00am and 4:30pm	Email:		
Date of attendance at Ber Program of study:			Ā	□ Postbacc
Transcript should be sent:  Dow Graduate or professional school application Employment Hold for end of term grades/evaluations Other instructions: Study Abroad Transfer Personal use				
•	-			anscript(s) to the address(es) Date:
Reques				Request 2
Reques	et 3			Request 4