

BENNINGTON COLLEGE

STUDY AWAY APPLICATION – LEUPHANA UNIVERSITY EXCHANGE

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

Program Provider Application Deadlines: Once your Bennington Application to Study Away has been approved, you can complete Leuphana’s application, which can be found [online](http://www.leuphana.de/en/services/io/incomings/exchange/prearrangement/antrag-auf-zulassung.html) (www.leuphana.de/en/services/io/incomings/exchange/prearrangement/antrag-auf-zulassung.html) . Your Leuphana application is due to the University November 1 for the spring term and May 1 for the fall term and full year. You are responsible for collecting and submitting all materials to Leuphana. **For Bennington transcripts, please fill out a transcript request form and make sure that it will be sent well in advance of Leuphana’s application deadline.**

Checklist for filling out the application:

- Student Information Form**
- Study Away Essay:** 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 Leuphana, the courses you plan to pursue, and most importantly, how this work will support, enhance, or inform your studies at Bennington. **Please attach a copy of this essay to your Study Away Application.**
- Proposed Course of Study Form:** 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 Leuphana’s [Study Abroad Module Catalog](https://mystudy.leuphana.de/vvz/showVVZ) (https://mystudy.leuphana.de/vvz/showVVZ) to plan your course of study. You should plan to register for 30 Leuphana credits, which equals 15 Bennington credits.
- Financial Responsibility Agreement:** Exchange participants will pay tuition and other mandatory fees to Bennington College and will pay housing fees to Leuphana. Outlined in this form are approximate expenses for one term of study at Leuphana that are not included in the exchange agreement between Bennington and Leuphana. Each student is responsible for his/her own meals, health and travel insurance, 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.).
- Declaration of Agreement:** Please read carefully and sign. **Note:** A parent’s or guardian’s signature is also required.
- Assumption of Risk Form:** Read and carefully complete the Study Abroad Acknowledgement and Assumption of Risks and Release Agreement. **Note:** Parent or guardian signatures are required.
- Passport:** Do you have a passport? Check it. Your passport **MUST** be valid for at least 6 months after your anticipated return from abroad. 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.**
- Emergency Contact Form:** Complete the attached Emergency Contact Information form and submit it with your Bennington Study Away Application.
- Consortium Form:** If you intend to transfer federal financial aid to Leuphana, 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.

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LEUPHANA UNIVERSITY EXCHANGE/ STUDENT INFORMATION FORM

Student's Full Name: _____

Current term at Bennington (3rd, 4th, etc.): _____

Email (non-Bennington): _____ Phone: _____

Are you a U.S. Citizen: Yes No

May we release your name and email to potential study abroad participants?

Yes No

Academic term away (term and year): _____

Permanent (Home) Address Information:

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.

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LEUPHANA UNIVERSITY EXCHANGE/ PROPOSED COURSE OF STUDY

Name of Student:

Check each box when complete:

- Fill in course information about the classes you hope to take while studying away. Please note that course availability may be limited, so be sure to include alternate course selections. We know that your course selections may not be finalized until you're away. **Please be sure to email your final course schedule to your Faculty Advisor and Dechen Albero when you have it.**
- Discuss your potential course selections with your Faculty Advisor and Plan committee members.
- You should enroll in 30 Leuphana University credits per term, which is the equivalent of 15 Bennington College credits.

Course Title	Department	Language of Instruction	US Credits
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Credits

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LEUPHANA UNIVERSITY EXCHANGE/ FINANCIAL RESPONSIBILITY AGREEMENT

Exchange participants will pay tuition and other mandatory fees to Bennington College and are responsible for their own housing and meals. It is strongly advised that housing and meals be arranged with Leuphana University (LU) through their international office. Each student is also responsible for providing his/her own transportation, health and travel insurance, 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 Leuphana University that are NOT included in the exchange. 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:

Flights:	\$1800	Miscellaneous:	\$1100
Language & Orientation Program:	\$75	Total estimated expenses:	\$8,240
Leuphana fee:	\$280		
Housing:	\$1750	(Leuphana fee includes rechargeable meal card and semester ticket entitling students to use	
Meals:	\$2500	Luneburg/suburban/regional buses and trains	
Textbooks & supplies:	\$685	to/from Hamburg with no further payments.)	
Residence Permit:	\$50		

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 Leuphana University and I am prepared to cover these costs.

Student Name: _____

Student Signature: _____

Parent Name: _____

Parent Signature: _____

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LEUPHANA UNIVERSITY 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 Leuphana University 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:

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LEUPHANA UNIVERSITY 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: _____

Country: _____ Term/Year Abroad: _____

In consideration and as a condition of Bennington College approving my participation in the above study abroad program (the "Program"), I hereby agree to the following:

1. Understanding the Terms of Bennington College's Approval:

I have read and understand the Study Abroad guidelines outlined in the *Bennington College Study Away Application*.

I also understand that Bennington College's prior approval of the transfer of credit does not imply Bennington College's responsibility for any aspects of the operation of the Program or university at which I will be studying.

I understand that should I change my Program of study from that listed above, the terms and conditions of this Agreement still apply.

Matters of academic credit will be evaluated on an individual basis. I understand that if I am unable to complete the Program due to program cancellation or for any other reason, I may not receive academic credit for my participation in the Program. I agree that in the event that I am unable to complete the Program, due to program cancellation or for any other reason, it is my responsibility to inquire about any possible refund with the Program manager or sponsor.

2. Medical Circumstances:

Are there any physical or mental health circumstances about which Bennington College should be aware that may affect your study abroad experience? **Yes** **No** (circle one)

If there are any physical or mental health circumstances that may affect my study abroad experience, I understand and agree that it is in my best interest to discuss the situation with my physician and with the Program.

In addition, if appropriate I should discuss the situation with the Bennington College Academic Services person in charge of off-campus study.

3. Risks of Travel and Studying Abroad:

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.

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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.

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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: _____ day/month/year
Name Printed: _____	Name Printed: _____
Address: _____	Address: _____
_____	_____
Phone: _____	Phone: _____
Witness: _____	Witness: _____
Witness Name Printed: _____	Witness Name Printed: _____
Address: _____	Address: _____
_____	_____

Signatures need not be notarized but must be witnessed.

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LEUPHANA UNIVERSITY 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: _____

Non-Bennington Email Address: _____

Please provide complete & accurate information for all emergency contacts listed. If this information changes at any point before or during the program, please notify Dechen Albero immediately.

1st Emergency Contact:

Relationship: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

Address (please provide physical address, *not* PO Box):

Email Address: _____

2nd Emergency Contact:

Relationship: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

Address (please provide physical address, *not* PO Box):

Email Address: _____

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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: _____ Middle initial: _____ Last name: _____

Full name while at Bennington: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____
 Weekdays, between 9:00am and 4:30pm

Date of attendance at Bennington: _____

Program of study: BA MAT MATSL MFA Postbacc

Transcript should be sent:

- Now
- To arrive by deadline: _____
- Hold for end of term grades/evaluations
- Other instructions: _____

Purpose of Transcript:

- Graduate or professional school application
- Employment
- Study Abroad
- Transfer
- Personal use

I hereby authorize the release of my transcript. Please mail # _____ transcript(s) to the address(es) listed below. Signature: _____ Date: _____

<p>Request 1</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Request 2</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>Request 3</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Request 4</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>