

BENNINGTON COLLEGE

STUDY AWAY APPLICATION

Bennington Application Deadlines: The Bennington Study Away Application is due two weeks prior to your chosen program's deadline; or November 1 for spring semester programs; May 2 for fall and academic year programs, whichever is earlier. Please be aware of your program provider's application deadlines, and plan accordingly. You may return your completed Bennington application to the director of learning beyond Bennington.

Program Provider Application Deadlines: After connecting with your faculty advisor on your school or program choice, and after submitting the Bennington Study Away Application, you can submit your application directly to the host institution or program provider. You are responsible for collecting and mailing all materials to the institution or program to which you are applying. **If you are required to send your Bennington transcript, please fill out a Transcript Request Form early and submit it to the Office of the Registrar to ensure that it will be sent well in advance of the program application deadline, as it can take up to two weeks to be processed.**

Checklist for Completing the Application:

- Study Away and the Plan:** Please connect with your faculty advisor as soon as possible to discuss your proposed study away and determine whether or not a Plan meeting will be necessary in the term preceding your time away.
- Leave of Absence Form:** Be sure to include all of the requested contact information. This may require that you look online for the appropriate telephone numbers, or may require you to contact your study away program. Please be aware that communication from the College will be sent to your Bennington account while you are away.
- Study Away Essay:** You will need to submit a revision of/addendum to your Plan essay that focuses on your reasons for studying away, the particular program you have selected, 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 with your faculty advisor and Plan committee members.
- Detailed Program Information:** Along with your application, please provide a brochure, booklet, or printed information from the provider or college's website that describes the program you plan to attend. Be sure to indicate any forms that will require a signature from the Provost and Dean's Office and/or the director of learning beyond Bennington.
- 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 Away Acknowledgement and Assumption of Risks and Release Agreement. If you are applying to a program deemed to be of "high risk" due to location, etc., you will also need to complete the Travel Waiver to High Risk Countries. See the director of learning beyond Bennington with any questions. **Note:** Parent/guardian signatures are required on both forms.

- Passport:** 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.** (Not applicable to students studying away in the U.S.).
- 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 your study away program, you will need to notify the Financial Aid Office and fill out this form once you've been accepted to a program.

BENNINGTON COLLEGE

STUDY AWAY APPLICATION / LEAVE OF ABSENCE

*If applying to more than one program, please complete this form for **each** program to which you're applying. By completing this form, you are requesting a Leave of Absence from the College for the academic term(s) listed below.*

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): _____

Do you plan to transfer **federal** financial aid to your study away school/program?

Yes No

Permanent (Home) Address Information:

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Study Away Program/Provider Information (If Applicable):

Program Name: _____

Address: _____

Address 2: _____

Telephone: _____ Fax: _____

Email: _____

College or University at which You Intend to Study, if Different from Above:

Institution Name: _____

Address: _____

Address 2: _____

Telephone: _____ Fax: _____

Email: _____

Faculty advisor preferences when you return:

1. _____
2. _____

Student requesting leave (please print): _____

Student requesting leave (signature): _____ Date: _____

In order to have a leave for study away approved, students must be in Good Academic and Disciplinary Standing and have approval from their faculty advisor, Plan committee, and the director of learning beyond Bennington. To re-enter, you must apply in writing to the Provost and Dean's Office by May 1 for the fall term and November 1 for the spring term. A Study Away Administrative Fee (SAAF) is charged to all students studying away for a term or year unless the student is studying away through one of the College's exchange programs. Please provide us with your mailing address while on leave; otherwise, mail will be sent to your permanent address on record.

BENNINGTON COLLEGE

STUDY AWAY APPLICATION / PROPOSED COURSE OF STUDY

*If applying to more than one program, please complete this form for **each** program to which you're applying.*

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 the director of learning beyond Bennington when you have it.**
- Discuss your potential course selections with your faculty advisor and Plan committee members.

Transfer credits awarded are determined by equivalent contact hours; 1 credit at Bennington is awarded for approximately 3 hours of weekly work (including class contact hours and outside work) over a 15 week term. A normal course load per term is 16 credits. Please be in touch with the director of learning beyond Bennington or the registrar if you are uncertain of how many credits you will need to register for to receive a full term of Bennington credit.

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

BENNINGTON COLLEGE

STUDY AWAY APPLICATION / DECLARATION OF AGREEMENT

- Studying away 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 faculty advisor, Plan committee, and the director of learning beyond Bennington.
- Students studying away for one or two consecutive terms must pay a Study Away Administrative Fee (SAAF) of \$600. This fee is billed prior to your term(s) away.
- Students must enroll in the equivalent of 12 Bennington credits (minimum) to maintain full-time student status while away.
- 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.
- Upon completion of your term(s) away, have an official transcript sent to the registrar here:

Bennington College
Office of the Registrar
1 College Drive
Bennington, VT 05201
USA

- Transfer credits awarded are determined by equivalent contact hours. Transfer credit for work done at foreign institutions may need to be submitted to the Center for Educational Documentation for their recommendation. Students will be notified upon receipt of their transcript if a CED evaluation is required.
- Students must earn a grade of full C or above in a course for it to be considered for transfer credit.
- Bennington College does not transfer grades or grade points from other institutions. Only credits are transferred.
- An official transcript for work completed away must be sent to the attention of the Office of the Registrar, no later than February 10 for students studying away in the fall term and no later than August 1 for students studying away for the spring term.
- 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 an official transcript is received and evaluated. **If a transcript does not arrive by the dates above, a student will not be eligible to receive financial aid for the coming term.**

- Students studying away for a full year must arrange to have a transcript sent to Bennington after each term/semester by the dates above. If a transcript is not received by the dates above, financial aid cannot be released for the following term.
- Consortium Students must successfully complete a full-time course load with grades of full 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: _____

BENNINGTON COLLEGE

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: _____

Program/University: _____

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 the director of learning beyond Bennington 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:

BENNINGTON

Study Abroad 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

BENNINGTON

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.

BENNINGTON

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: _____
Date: _____ day/month/year
Name Printed: _____
Address: _____

Phone: _____
Witness: _____
Witness Name Printed: _____
Address: _____

Parent Signature: _____
Date: _____ day/month/year
Name Printed: _____
Address: _____

Phone: _____
Witness: _____
Witness Name Printed: _____
Address: _____

Signatures need not be notarized but must be witnessed.

PLEASE RETURN TO ACADEMIC SERVICES WITH YOUR BENNINGTON APPLICATION TO
STUDY AWAY

BENNINGTON COLLEGE

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: _____

Request 1

Request 2

Request 3

Request 4

