## Acadia University Study Abroad Exchange Program Agreement of Participation

Acadia University, established under the Act Respecting Acadia University, Chapter 134 of the Acts of Nova Scotia, 1891 (and amendments thereto consolidated to and including 1995), hereinafter referred to as 'Acadia'.

It is the intention of Acadia to enter into agreements with various partner universities to provide for students an opportunity to participate in academic student exchanges. Acadia students participating in such exchanges must acknowledge and agree with the terms and condition set forth below:

## Academic & Financial Requirements

I understand that the academic aspects of the Acadia Study Abroad Exchange program are such that participation for the full academic period for which I have been selected is necessary to achieve the objectives of the program and the full performance of this agreement.

I will take such courses, and undergo such examinations and tests as are required by both Acadia and my host university and conform to the disciplinary codes and regulations of those institutions.

I understand I have the right to withdraw from the exchange program prior to my departure; however written notice of this withdrawal must be submitted to the Study Abroad Exchange Office prior to the first day of classes at my host institution.

I understand Acadia has no obligation upon such withdrawal to place me in any institution with which Acadia, through its study abroad exchange program, has a contractual relationship.

I will meet with my Acadia Academic Advisor prior to applying to the Host institution to discuss my academic intentions while studying abroad in order to facilitate the transfer of credit to the Home institution for courses successfully completed.

I agree to pay the cost of tuition at Acadia through Student Accounts prior to the fee deadlines established in the Acadia Calendar.

I am responsible for all costs incurred during the exchange program including but not limited to, such expenses as room and board, books and supplies, local transportation, airline tickets, transportation to and from the Host institution, medical and insurance fees, costs associated with field trips and all other personal expenses.

## Health, Immigration and other Responsibilities

I understand that I will be functioning in a new environment, which may present different challenges. I understand facilities and services may not be comparable to the facilities and services at Acadia.

I accept sole responsibility for the cost of medical expenses incurred by me while on exchange and will obtain appropriate medical coverage prior to any travel associated with my participation in the exchange program.

I accept responsibility for obtaining any necessary documents, which may be required for entry, living or departure from the host country, including the appropriate visa for studying abroad.

I agree to participate in a pre-departure orientation at the Acadia University prior to my departure for my host institution.

I will read the Study Abroad & Exchange Programs handbook, available at Acadia's Wong International Centre and Acadia's Study Abroad Exchange Program website, in sufficient time as to allow me to make all necessary preparations stated in the handbook.

I agree to submit within two weeks of the first day of classes at my Host institution the Confirmation of Enrollment form. This form must be submitted to the Acadia Study Abroad Exchange Office.

## Reentry

I hereby grant permission for the use of my name and photograph for publicity and/or orientation purposes for the promotion of exchange programs in publications, audio-visual presentations and other related media.

I agree to submit to the Study Abroad Exchange Office an Exchange Experience Report within two weeks of my last exam or class held at my host institution.

I agree to participate in planned information and promotion sessions to be held throughout the year, when I return to Acadia.

Next-of-Kin:

I appoint the following person my Designated Next-of-Kin and authorize Acadia University to contact this person for, or with, information about me in my absence. I have fully informed my Designated Next-of-Kin regarding all aspects of my proposed participation in the student exchange, including the nature of any possible risks.

Name:	Relationship to you:
Address:	
City:	Postal Code:
Email:	Telephone:

I, as a participant in Acadia's Study Abroad Exchange program, hereby acknowledge and agree with the terms an	nd
conditions stated above.	

Name [print]:	Student Number	
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Signature: \_\_\_\_\_Date [dd/mm/yyyy]: \_\_\_\_\_