



STUDY ABROAD STUDENT CONTRACT

Name _____ ID# _____

Fall 20 ____ Program _____ Study Site _____

Spring 20 ____ Program _____ Study Site _____

Please read and check each statement.

I have carefully reviewed the following sources of information about each of the countries in which I plan to travel (must review both):

U.S. State Department Travel Advisory website for planned countries of travel
<http://travel.state.gov/>

U.S. State Department Country Background Notes website
<http://www.state.gov/r/pa/ei/bgn/>

I have attached a copy of my acceptance letter/email from my program sponsor or university and understand that upon signing this form I will be removed from on-campus housing for the semester/year I am abroad.

I understand that I will pay CMC tuition and the CMC Study Abroad Program Fee regardless of study site or program costs.

I understand that CMC will pay my program fees, tuition, room, and board expenses (for periods when classes are in session), as well as provide a round-trip student airfare allowance and, in certain cases, may provide a local transportation allowance and/or international health insurance allowance.

NOTE: Program fees cover a variety of expenses depending on your destination. Please pay close attention before your departure to what **is and is not** covered.

I understand that CMC will pay the non-refundable commit/acceptance deposit on my behalf directly to my program sponsor.

I understand that CMC does not cover expenses for study abroad relating to passport, passport photos, visa, health exams, immunizations, field trips not included in program cost, or outside personal expenses including travel.

FORM CONTINUES ON BACK

- I understand that it is my responsibility to arrange for travel to and from the study site with my CMC airfare allowance.
- I understand that I am required to have basic medical and accidental coverage in addition to the iNext card while en-route to and for the duration of my off-campus study.
- I understand if I withdraw from study abroad I must notify the program sponsor, the Registrar, and Off-Campus Study Office **in writing** of my intention to return to CMC. I understand that **on-campus housing is not guaranteed**. I understand that should I decide not to return to CMC right away, I will be required to petition the Academic Standards Committee for readmission.
- I have read, understand and agree to the College's financial policies explained in the College catalog and written materials provided by OCS. In the event of withdrawal from an OCS program, the refund policy of the program provider will apply and Claremont McKenna College will require repayment of any funds paid out directly to me. I understand that I will be liable for any other unrecoverable expenses incurred on my behalf by CMC.

By signing this contract I authorize CMC to pay my non-refundable commitment deposit and all program fees to my program sponsor.*

SIGNATURE

DATE

**Payment for your commitment deposit and program fees cannot be made without this signed and dated form or for any student who has an outstanding debt to the College.*