



France Modern Languages

PROGRAM DESCRIPTION

This immersion program is for University students who have completed at least 10 hours of college level French (French I and II), or have the equivalent proficiency in French, and is especially designed for beginning French majors. Students must enroll in 6 hours of credit (one grammar course and one conversation/culture course). On three weekends, there is an excursion to some part of Western France: Mont Saint Michel and Saint Malo, Chateaux of the Loire Valley, and Normandy Invasion Beaches.

LOCATION DESCRIPTION

Angers, a modern city of 260,000 inhabitants, is located in the west of France, in the Loire Valley, in a region famous for its history, gardens, tapestries and climate (*la douceur angevine*). The people are noted for their friendliness (*l'accueil*) and the chateau and cobblestone streets are constant reminders that Angers was once an old medieval town.

HOUSING

In Angers students stay with a French family, where they have breakfast and dinner, thus providing the opportunity to speak French every day from morning to night. Students are on their own for lunch. Angers has many *boulangeries* and *cafés* that can provide an inexpensive lunch and another occasion to use French daily in real-life situations.

Note: FIU is not responsible for delays, changes in itinerary, changes in the content and cost of the program or other matters that are beyond their control.

PROGRAM OVERVIEW

SEMESTER

Summer B 2009

DATES

July 1—July 30, 2009

COURSES

- FRE 2200** Intermediate French
- FRE 2241** Intermediate French Conversation
- FRE 3410** Advanced French Conversation
- FRE 3420** Review Grammar/Writing I
- FRE 3421** Review Grammar/Writing II
- FRE 4422** Review Grammar/Writing III
- FRE 3504** Language and Culture

CREDITS

6 credits

COST

The estimated program cost of **\$3,449** includes: daily classes with French professors while in France, family stay with breakfast and dinner in Angers, and three full-day excursions. In addition, students must pay a non-refundable Study Abroad Fee (\$175) and six credit instructional fee for Summer B (\$695). Airfare and transportation to Angers, as well as lunches, are not included.

PROGRAM INFORMATION

Modern Languages Department
University Park Campus
Professor Peter Machonis
Professor Maria Antonietta Garcia
DM 498B
T: 305-348-2379
E: Peter.Machonis@fiu.edu
garciahd@fiu.edu
educationabroad@fiu.edu
W: educationabroad.fiu.edu

OFFICE OF EDUCATION ABROAD

APPLICATION FOR **ANGERS MODERN LANGUAGE** SUMMER PROGRAM

Please make sure to read these instructions thoroughly, and keep a photocopy of your entire application packet for your personal records. OEA is not able to provide you with a copy of your complete application.

SECTION I

1. Applications are not considered complete unless **all** parts are filled in and submitted by the published deadlines for each program.
2. If you are accepted for the FIU Sponsored Program to which you are applying, you will be registered at FIU for the courses indicated on your course registration form. **OEA will register all students going abroad. You should NOT register for on-campus courses during your term abroad.**
3. You are responsible for clearing any and all holds - cashier, financial aid or departmental – in order to be registered for your courses abroad.
4. Financial Aid (loans and some scholarships) is available for FIU Sponsored Program participants.
5. All accepted students must attend a pre-departure meeting with the OEA, as well as any program specific pre-departure meetings scheduled by the Program Director.

SECTION II

All applicants must turn in two sets of the application packet (one original, one copy), along with the indicated supporting materials to the Office of Education Abroad, DM 441, or mail to: Office of Education Abroad, attn: Angers Modern Language Program, Florida International University, 11200 SW 8th Street, DM 441, Miami, FL 33199.

FIU Students

Application Requirements

1. Application for FIU Sponsored Education Abroad Programs
2. One passport-size color photo (some programs may require more)
3. Copy of passport
4. Study Abroad \$175 non-refundable fee (money order or certified check only)

Non-FIU Students

Application Requirements

1. Application for FIU Sponsored Education Abroad Programs
2. Unofficial transcripts
3. One passport-size color photo (some programs may require more)
4. Copy of passport
5. Transient Student Form ²
6. Non-Degree Seeking Student Form ³
7. Study Abroad \$175 non-refundable fee (money order or certified check only)

¹ Payments should be made payable to: “**Florida International University**” (or “**FIU**”), and must include the following information: Applicant Name, Panther ID Number, Name of the Study Abroad Program
-- **Please note that we are unable to accept credit card payments** --

² Non-FIU Students who attend other public universities in the State of Florida must submit a completed Transient Student form in order to be enrolled in FIU courses. You should obtain this form via <http://www.facts.org/>.

³ Non-FIU students who do not attend a public university in the State of Florida must submit a completed Non-Degree Seeking Student Form in order to obtain an FIU student number and be enrolled in FIU courses. You may download this form at: http://www.fiu.edu/orgs/register/Non_Degree_Form_Web.pdf

SECTION III

For program specific requirements, please contact Professors Peter Machonis and Maria Antonieta Garcia, Faculty Directors, at peter.machonis@fiu.edu / garciahd@fiu.edu , room DM 498B, (305) 348-2379.

PAYMENTS:

The cost of the program is \$3449. Program costs include: daily classes with French professors while in France, family stay with breakfast and dinner in Angers, and three full-day excursions. In addition, students must pay a non-refundable Study Abroad Fee (\$175) and six credit instructional fee for Summer B (\$695). Airfare and transportation to Angers, as well as lunches, are not included.

FIU tuition and fees are payable upon the Summer Deadline for Payment of Tuition

SECTION IV

For **ALL applicants**, the following items **MUST** be submitted to OEA upon your acceptance into the program:

1. Course Registration form (provided)
2. Medical Information Form (provided)
3. Copy of your student visa (if required by your host country)

All students are also required to attend an EDUCATION ABROAD Mandatory Pre-Departure session. The dates, times and locations of these sessions will be announced.

PLEASE NOTE: Failure to complete and/or submit all of the above materials prior to departure for the host institution may result in your cancellation from the program.

Please submit completed applications to:

**Florida International University
Office of Education Abroad
University Park, DM441
11200 SW 8th Street
Miami, FL 33199
Attn: Applications**

Phone: (305) 348-1913 Fax: (305) 348-1941

Thank you for your interest in Florida International University's Education Abroad Program.

**OFFICE OF EDUCATION ABROAD
APPLICATION FOR FIU SPONSORED EDUCATION ABROAD PROGRAMS**

EDUCATION ABROAD PROGRAM INFORMATION:

Program Name _____

Location (city & country) _____

Name _____

Last

First

MI

Panther ID _____

Date of Birth _____ Gender _____

Country of Citizenship _____

Attach
One
Passport-size
Color Photo

REQUIRED: *May we release your name and e-mail address to other education abroad students?*
 ___ YES ___ NO

Please fill out both addresses completely, even if they are the same. If either address changes before departure, contact **EDUCATION ABROAD** immediately!

CURRENT ADDRESS:

VALID until _____
 (Month/Day/Year)

Street _____ Apt. # _____

City _____ State _____ Zip _____

Local Phone (____) _____

Cell Phone (____) _____

FIU Web Mail: _____

PERMANENT ADDRESS:

Check here if same as Current Address

Street _____ Apt. # _____

City _____ State _____ Zip _____

Local Phone (____) _____

Alternate Email: _____

ACADEMIC AND STUDENT CONDUCT INFORMATION

I am in good academic standing and I am free of conduct probation. I will make the OEA office aware of any charges pending against me. If I provide false or misleading information or my conduct status should change prior to program departure, my admissions to the program will be rescinded and any program fees paid will not be refunded. I understand that I must meet minimum cumulative GPA requirements for the program.

_____ (please initial here). By initialing, you are acknowledging that you have read the above statements, and you are giving the FIU Office of Education Abroad permission to check on your records with the Office of Student Conduct at FIU.

Major(s) _____ Minor(s) _____

GPA _____

Circle your Class Level: FR SO JR SR GRAD

Expected Date of Graduation _____

FINANCIAL INFORMATION

Financial Aid consists of scholarships, loans, grants, etc. Do you expect to receive **ANY Financial Aid** while abroad?
_____ YES _____ NO

If you checked YES, please indicate the type(s) of aid you expect to receive for your study abroad program:

_____ FL Prepaid _____ Stafford, Perkins, and/or Plus Loan _____ Private Loan _____ FIU Scholarship(s)

_____ Other (explain): _____

NOTE: Students must meet any Financial Aid requirements in order to be eligible.

EMERGENCY CONTACT INFORMATION

Please be aware that EDUCATION ABROAD **cannot** release information to, or contact any person(s) not listed on this form, including your parents. Also note that we **WILL** be able to release information related to your financial aid, registration, etc., to anyone listed on this form. If you have any questions, please ask at the OFFICE OF EDUCATION ABROAD .

NAME _____

RELATIONSHIP _____

ADDRESS _____

CITY/STATE/ZIP _____

HOME PHONE _____ WORK PHONE _____

FAX _____ EMAIL _____

NAME _____

RELATIONSHIP _____

ADDRESS _____

CITY/STATE/ZIP _____

HOME PHONE _____ WORK PHONE _____

FAX _____ EMAIL _____

NAME _____
RELATIONSHIP _____
ADDRESS _____
CITY/STATE/ZIP _____
HOME PHONE _____ WORK PHONE _____
FAX _____ EMAIL _____

Are there any health concerns of which the Program Director should be made aware? YES NO

Please read the following:

I acknowledge that the submission of this application to the Office of Education Abroad does not guarantee my enrollment in the FIU Sponsored Program to which I have applied. I understand that final acceptance into the program will be determined by the Program Director. If I have financial aid, I am responsible for notifying OEA of my plans to use these funds, and accepting them through the Financial Aid office and/or PantherSoft.

I have carefully read, and I understand the contents herein. I am at least 18 years of age, and in signing this agreement, of my own volition, I agree to be bound by the terms of this application and the policies of FIU and the Office of Education Abroad.

Applicant's Signature: _____ **Date:** _____

OFFICE OF EDUCATION ABROAD

**OVERSEAS STUDENT PARTICIPATION AGREEMENT
RELEASE AND ASSUMPTION OF RISK**

I, the undersigned, _____, being of legal age, do hereby agree and promise the following for and in consideration of my application for participation and acceptance in a Study Abroad Program (“Program”) offered by Florida International University.

1. I shall be bound by and comply with the terms, conditions, and obligations of the Program, including those relating to fee payment, late application, and refund policies. My failure to comply with the terms of the Program or to conduct myself in a fitting manner may result in my involuntary withdrawal from the Program by either Florida International University or my host institution.
2. My participation in the Program is voluntary and not a requirement of my curriculum at Florida International University. I have chosen to participate in the Program because of the learning and cultural experiences I will gain through study in a foreign country. I acknowledge that I am neither an agent nor representative of Florida International University and may not look to the University or the State of Florida for reimbursement of expenses. I accept full responsibility for all costs and expenses associated with my participation in the Program.
3. I acknowledge that in the course of my participation in the Program and related activities, I may be exposed to risks inherent in travel to a foreign country, some of which are known and some of which are unknown, which may result in property damage or loss, as well as personal or bodily injury which could be painful, permanently disfiguring or debilitating and even fatal. I voluntarily assume all risks, including, but not limited to, sickness, bad weather, strikes, war or military actions, quarantine, detention, acts of terrorism. I further expressly assume full responsibility for any risk of bodily injury, death, or property damage due to the negligence of the State of Florida, the Florida Board of Education, the Florida University Board of Trustees or Florida International University, and their respective employees and agents, or otherwise.
4. I agree and acknowledge that I will have time for, and may engage in personal activities unrelated to the purpose of the Program while I am abroad. Such activities will be at my sole responsibility and risk.
5. I acknowledge that Florida International University, the Florida International University Board of Trustees, the Florida Board of Education and the State of Florida and their respective officers, employees, and agents are not responsible for losses or expenses suffered by me due to delays, changes in itinerary, changes in the content of program study, or other matters which are beyond their control.
6. I, for myself, my heirs, executors, administrators and assigns release, waive, discharge and relinquish, and agree to hold harmless the State of Florida, the Florida Board of Education, the Florida International University Board of Trustees, and Florida International University, and their respective officers, employees and agents, from and against all claims and causes of action which may arise from my participation in the program and its related activities, whether the same should arise by reason of the negligence of anyone participating in the program or its related activities, or otherwise, and agree that under no circumstances will I, or anyone claiming through me, prosecute or present any claims for personal or bodily injury, property damage or loss, or wrongful death against the State of Florida, the Florida Board of Education, the Florida International University Board of Trustees, or Florida International University, or their respective officers, employees, and agents.

I have read and understood the full contents of this document, and agree to be bound by it.

Student Signature

Witness Signature

Student Name (Print)

Witness Name (Print)

Date

Date

OFFICE OF EDUCATION ABROAD

Medical Information Form

Name of Applicant: _____

Host Institution/Program Name : _____

Age: _____ Height: _____ Weight: _____ Sex : ____ Male ____ Female

TO BE SIGNED BY THE APPLICANT

I hereby agree to the disclosure of information requested in this form and I waive my right to doctor-patient confidentiality in the event that Florida International University, and / or any medical facility in Florida or abroad requests my medical records during the course of my education abroad program.

Signature: _____

Date: _____

TO BE COMPLETED BY A HEALTH CARE PROFESSIONAL:

PART I

Does the applicant now have or has she or he had any of the medical problems listed below (Please check appropriate box).

	YES	NO
a. Allergies to food or medications	<input type="checkbox"/>	<input type="checkbox"/>
b. Physical Handicaps	<input type="checkbox"/>	<input type="checkbox"/>
c. Psychiatric Disorders (including Eating Disorders)	<input type="checkbox"/>	<input type="checkbox"/>
d. Neurological Disorders	<input type="checkbox"/>	<input type="checkbox"/>
e. Cardiac Problem	<input type="checkbox"/>	<input type="checkbox"/>
f. Arthritis	<input type="checkbox"/>	<input type="checkbox"/>
g. Cancer	<input type="checkbox"/>	<input type="checkbox"/>
h. Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
i. Glaucoma	<input type="checkbox"/>	<input type="checkbox"/>
j. Hypertension	<input type="checkbox"/>	<input type="checkbox"/>
k. Migraine Headaches	<input type="checkbox"/>	<input type="checkbox"/>
l. Renal Problems	<input type="checkbox"/>	<input type="checkbox"/>
m. T.B., asthma, or other Respiratory problems	<input type="checkbox"/>	<input type="checkbox"/>
n. Ulcers	<input type="checkbox"/>	<input type="checkbox"/>
o. Gynecological Problems	<input type="checkbox"/>	<input type="checkbox"/>
p. Learning Disability	<input type="checkbox"/>	<input type="checkbox"/>
q. Other	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered yes to any of the above, please explain in detail.

Please attach additional sheet if necessary.

PART II

1) Is the applicant currently receiving any medical treatment which would have to be continued while he /she is abroad? If yes, please describe its nature.

2) In your judgment, is there any medical reason why this applicant cannot actively participate in an extended (minimum one semester) exchange program abroad.

3) In my opinion the state of the applicant's health is:

Excellent Good Fair Poor

Date: _____ Signature: _____

Name (Print): _____

Position: _____

Address: _____

Zip: _____ Phone _____

**FLORIDA INTERNATIONAL UNIVERSITY
OFFICE OF EDUCATION ABROAD
COURSE REGISTRATION FORM FOR
FIU SPONSORED EDUCATION ABROAD PROGRAMS**

Student Name: _____ Panther ID# _____

Name of Program: _____ Email: _____

- I authorize the Office of Education Abroad to register me for the courses listed below.
- I understand that I am responsible for paying, by the deadlines published in the FIU Academic Calendar, all associated FIU instructional fees for the courses in which I have asked to be enrolled.
- I understand that I am subject to FIU enrollment, add/drop, and payment deadlines. If I am registered or reinstated AFTER the registration deadline, I may incur late registration fees.
- I understand that if I do not adhere to the FIU payment schedule, I may be dropped from my course(s) and will be assessed a \$100 late payment fee plus a \$100 late registration fee for reinstatement.
- Should I cancel my participation in the program, I must notify my Faculty Director and must request to be dropped from my study abroad course(s) immediately.
- Notification of cancellation must be received by the OEA prior to the university deadline for add/drop. I understand that if I fail to notify the OEA prior to this deadline I will be held liable for course fees.
- Payments for instructional fees are made to the FIU Cashier in PC 120 or online via PantherSoft and NOT in the Office of Education Abroad.

Course number (e.g. FRE 2200)	Course Title (e.g. Intermediate French)	Credits (e.g. 3)
Total Number of Credits		

Student Signature

Date