



APPLICATION FOR FIU in GENOA PROGRAMS

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. In order to be eligible for the **FIU in GENOA Program**, the OEA requires a cumulative **3.0 GPA** for **undergraduate students**, or a **3.5 GPA** for **graduate students**.
2. Applications are not considered complete unless **all** parts are filled in and submitted by the stated deadlines.
3. If you are accepted for the FIU in Genoa Program, you will be registered at FIU for the four courses offered on the program (a total of 12 credits). OEA will register all students going on this program. (You should NOT register for on-campus courses during your term abroad.)
4. You are responsible for clearing any and all holds - cashier, financial aid or departmental - as well as validating your schedule if you have financial aid.
5. Financial Aid is available for FIU in Genoa participants.
6. You must attend a series of pre-departure meetings with the OEA before you leave.

SECTION II

All applicants must turn in the application packet, along with the indicated supporting materials, to the Office of Education Abroad in PC 113.

The Deadline for turning in application packets are as follows:

November 13 for the Spring program (European Studies);

Applications for the FIU in Genoa Program will be accepted after the deadline on a space available basis and with a late fee of \$200.

FIU Student Applicants

1. Application for FIU in Genoa Programs
2. Application Deposit \$500.00 (Check or Money Order – NO credit cards; Non-refundable) ¹
3. One passport-size color photo
4. Two letters of recommendation ²
5. Un-official transcript
6. SASS Report
7. Statement of purpose (1-2 pages)

Non-FIU Student Applicants

1. Application for FIU in Genoa Programs
2. Application Deposit \$500.00 (Check or Money Order – NO credit cards; Non-refundable) ¹
3. One passport-size color photo
4. Two letters of recommendation ²
5. Un-official transcript
6. Transient Student or Non-Degree Seeking Student Form ³
7. Statement of purpose (1-2 pages)

¹ Checks or Money orders 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

Program Term and Year

-- **Please note that we are unable to accept credit card payments --**

**** Deposits are only refundable if the program is cancelled or if an applicant is not accepted into the program.****

² A copy of the letter is included in the application packet. **At least one** reference must be **academic** and the second may be work related; personal references are not acceptable.

³ Students of other public universities in Florida must submit a Transient Student form obtained in the Office of the Registrar at your home campus. Students from other institutions must submit a Non-Degree Seeking Student Form available at the following web site: http://www.fiu.edu/orgs/register/tb_forms.htm

SECTION III

If you are selected to participate in the ***FIU in Genoa Program***, the following additional documents must be submitted to OEA **within three weeks (21 days)** of your acceptance:

1. Declaration of Finances with necessary documentation (form will be provided by OEA)
2. Copy of Passport (must be valid for AT LEAST 6 months beyond the end date of your program)

SECTION IV

For **ALL applicants**, the following items **MUST** be submitted to OEA **at least 30 days prior** to your program's start date:

1. Copy of your student visa (All students going to Italy are required to have a student visa. Application materials will be provided by OEA.)

All students are also required to attend OEA Mandatory Pre-Departure sessions. 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
Modesto A. Maidique Campus, PC 113
11200 SW 8th Street
Miami, FL 33199
Attn: FIU in GENOA Applications**

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

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



APPLICATION FOR FIU in GENOA PROGRAMS

Name _____
Last First MI

Panther ID _____

Date of Birth _____ Gender _____

Country of Citizenship _____

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

Please fill out both addresses completely, even if they are the same. If either address changes before departure, contact OIS 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: _____

PROGRAM INFORMATION

For which program are you applying?

____ Fall – Art and Architecture

____ Spring – European Studies

____ Summer – Landscape Architecture/Interior Design

ACADEMIC AND STUDENT CONDUCT INFORMATION

College/Department _____ GPA _____

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 have a minimum cumulative GPA of 3.0 to participate in the FIU in GENOA Program. If I have below the required 3.0 minimum GPA, I have attached a statement explaining any extenuating circumstances, and requesting consideration of my application. _____ (please initial here). By initialing, you are giving us permission to check on your records with the Office of Student Conduct at FIU.

Major(s) _____ Minor(s) _____

Circle your Class Level: FR SO JR SR GRAD

Expected Date of Graduation _____

Have you taken Italian Language Classes before? Yes (please list) _____
 No

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:
_____ Bright Futures _____ FL Prepaid _____ Stafford, Perkins, and/or Plus Loan _____ Private Loan
_____ FIU Scholarship(s) _____
_____ Other (explain): _____

EMERGENCY CONTACT INFORMATION

Please be aware that OEA **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. Provide as much complete information as possible. If you have any questions, please ask at the OIS.

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 _____

MEDICAL INFORMATION

Are there any health concerns of which the Program Coordinator abroad should be made aware?

YES NO

PAYMENT INFORMATION

The estimated program fees for the FIU in GENOA program will be \$8,500.00.

These fees do not include airfare, FIU instructional fees, meals, and other expenses. Estimated costs not included are as follows:

- Airfare estimate: \$1000.00
- FIU instructional fee (of \$142.04 per credit) minimum of 12 undergraduate credits
- Meals in Genoa (semester): \$2,500 depending upon spending and eating habits

The program cost of \$7,500 includes accommodations in Genoa, dedicated studio space in Genoa, internet access at the studio, some local activities, mandatory health insurance and academic travel. Program fees will be collected by the Office of Education Abroad on the following payment schedule:

November 13: \$500 non-refundable deposit (with application)*
December 2: \$3500*
January 6: \$3500**

Please keep in mind that you will also have to pay your FIU instructional fee by the Registrar's published deadline on the Registrar's Academic Calendar.

* The deposit may be paid using personal check, cashiers check or money order.

** **Second and Final Payment must** be paid using cashiers check or money order.

We do not accept credit cards.

REFUND and PROGRAM POLICIES

This program consists of payments to OEA for program fees, and to the Registrar's office for instructional fees.

Office of Education Abroad – Program Fees

Requests for refunds must be made in writing and dated. **Verbal, e-mail and fax requests will not be accepted.** The initial \$500.00 deposit is non-refundable. Students canceling or withdrawing within 60 days prior to the start of a program are liable for all expenses. Students on financial aid must adhere to all refund policies and deadlines as stated by the FIU Financial Aid Office. No refund will be given if a student is dismissed for misconduct.

FIU will not refund airfare or other costs incurred as a result of program changes or cancellations.

Refund Amount based on Withdrawal date

More than 90 days prior to departure: Full refund less the \$500 non-refundable deposit.

61-90 days prior to departure: Full refund less 50% of the program fee and the \$500 non-refundable deposit.

Less than 60 days prior to departure: No refund.

Once the program has begun, there will be no refund made for any portion of the program that the participant declines, or for any unused services following withdrawal from the program.

Office of the Registrar- Tuition and fees

The refund policy is that of FIU and can be located in the Undergraduate or Graduate Catalog. If you have questions regarding this policy, please contact the Office of the Registrar. You may request a copy of the policy from OEA.

Program Cancellation

The FIU Office of Education Abroad reserves the right to cancel a program at any time or make changes, modifications or substitutions to the program in case of changes at the host site location or in the interest of the program and its participants.

Course Selection

Students will take a set course offering consisting of four courses that total 12 FIU undergraduate semester credit hours.

Please read carefully the following:

“I acknowledge that the submission of this application to the Office of Education Abroad Studies does not guarantee my enrollment in the FIU in Genoa Program. I also understand that if I am accepted I will be responsible for arranging my travel and obtaining my student visa (with the assistance of the OEA). Additionally, I understand that I am responsible for paying for my classes at FIU by the Registrar’s posted deadlines. 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 understand that all Program Requirements, Policies and Rules as well as the FIU student Code of Conduct must be observed by me as a Program participant. Failure to follow Program Requirements, Policies or Rules of the FIU Code of Conduct may result in expulsion from the Program, loss of credits, forfeiture of Program fees or any other penalty(ies) provided for in the Student Code of Conduct.

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:_____



**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

Student Name

Date

Witness Signature

Date



Medical Information Form

Name of Applicant: _____

Host Institution: _____

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

TO BE SIGNED BY THE APPLICANT

I hereby 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.

Signature: _____

Date: _____

TO BE COMPLETED BY A PHYSICIAN

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) Has the applicant tested positive for AIDS virus (HTLV III Antibody)?

Yes

No

2) 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.

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

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

Excellent

Good

Fair

Poor

Date: _____ Signature: _____

Name (Print): _____

Position: _____

Address: _____

Zip: _____ Phone _____



REFERENCE FORM

Please return the completed form to: FIU, Office of Education Abroad, 11200 SW 8th Street, University Park, DM441, Miami, FL 33199, or fax to 305-348-1941.

TO THE APPLICANT: *This reference must be completed by a faculty member, academic advisor, or employer.*

Only **one** reference may be provided by an employer. **NO PERSONAL REFERENCES WILL BE ACCEPTED.** If you waive your right to have access to the information provided, you will not be able to see this form once it is submitted to OEA. Please complete the top section of this form (items 1-4) and then give it to the person who will provide the reference.

1. Student Name: _____
(First) (M.I.) (Last)

2. Panther ID: _____

3. Name of person who will be asked to fill out this form:

4. I, _____ hereby Waive Retain my right to have access to the information
Student Name
provided in this reference.

Signed _____ Date _____

DEAR PROFESSOR/ADVISOR/EMPLOYER:

The above student is requesting your assistance in providing a reference for his/her participation in an FIU Study Abroad Program. Overseas experience is considered an important part of higher education. While these opportunities have many benefits, the overseas experience can challenge and build upon a student's ability to interact in a variety of situations. The following information will help us select students who will be able and willing to gain the most from the experience. We appreciate your time and consideration.

GENERAL INFORMATION

Name: _____

Title: _____ Department: _____

College/University/Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone :() _____ Facsimile :() _____

Email address (if available): _____

1. Please indicate any classes which the above student has taken from you.

2. If you have not had this student in class, how do you know the applicant?

3. Please assess the student's academic work or job performance. List the applicant's strengths and weaknesses as appropriate.

3. In general, how do you feel the applicant will benefit, personally and/or academically, from an overseas experience?

4. Please rank the applicant in the following categories, using a scale of 1 to 5, with 1 being poor and 5 being excellent. Please use N/A if you have not had the opportunity to observe this trait.

Ability to work independently	1	2	3	4	5	N/A
Self-confidence	1	2	3	4	5	N/A
Reliability	1	2	3	4	5	N/A
Positive association with others	1	2	3	4	5	N/A
Honesty	1	2	3	4	5	N/A
Maturity	1	2	3	4	5	N/A
Flexibility/adaptation to new situations	1	2	3	4	5	N/A
Potential for academic success	1	2	3	4	5	N/A
Current academic performance	1	2	3	4	5	N/A
Capacity for innovation	1	2	3	4	5	N/A
Degree, of focused academic interests	1	2	3	4	5	N/A

Please briefly describe the most positive aspects, personally and/or academically, of the applicant.

Please briefly describe reservations, if any, you may have with regards to this student's participation in an overseas program.

Additional/Final Comments
