



Statement of Intent to Study Abroad: Academic Programs & Contracts

Purpose of this Form:

- 1. To indicate your current intent to study abroad through an Evergreen Academic Program or an Evergreen Individual Contract;
2. To confirm your understanding of important Evergreen policies about study abroad through programs or contracts;
3. To confirm your signed approval for a student conduct background check.

Name: _____ Phone: _____

Student ID number: _____ Email: _____

I intend to study abroad through an ___ Academic Program ___ Individual Contract

Program or Contract Name: _____

Faculty: _____, or ___ Not Yet Determined

Countries: _____

Quarters/Years: ___FA ___WI ___SP ___SU Year(s) _____

Study Abroad Participation Procedures and Forms:

All students must complete the following:

- 1. Intent to Study Abroad Form/Authorization for Student Conduct Review & Records Release
2. Additional Academic Program Applications/Documents, if required by faculty.
3. Approved Contract Proposal, if arranging a contract.
4. Student Health Review Form
5. Emergency Information Summary Form for Staff, Faculty & Providers
6. Evergreen Travel Waiver Form
7. Participate in all required Study Abroad Predeparture Orientation Workshops.
8. Provide Proof of Medical Insurance that meets minimum requirements while studying abroad.
9. Pay in advance any Study Abroad Administrative or Program Fees/Costs by stated deadlines.

Study Abroad Policies for Academic Programs and Individual Contracts

- Evergreen will complete a student conduct check as part of the study abroad approval process. _____ initials
• I must complete all required Evergreen forms, processes, and orientation meetings by stated deadlines. _____ initials
• I must maintain good academic standing from point of application through end of program/contract. _____ initials
• I must honor the Evergreen Student Conduct Code and Social Contract while studying abroad. _____ initials
• I must observe all host country laws while studying abroad. _____ initials
• I must observe all Evergreen guidelines and host country laws regarding alcohol and illegal drug use. _____ initials
• I must have medical insurance that meets Evergreen's minimum requirements while studying abroad. _____ initials
• Program: I must pay the non-refundable \$400 Program Deposit and Program Fees by stated deadlines. _____ initials
• Contract: I must complete at least one quarter of interdisciplinary program study prior to contract study. _____ initials
• Contract: I am limited to 48 credits of Learning Contracts and another 48 credits of Internship Contracts. _____ initials
• Contract: I must submit my contract for Dean's approval by the Friday of Week 10 of the prior quarter. _____ initials

- Contract: I must seek **pre-approval** from OIP/the Dean prior to study in any country designated by the U.S. State Department at Advisory Level 3 or 4. _____initials
- Contract: I must pay the **non-refundable \$100 Study Abroad Administrative Fee** prior to OIP approval. _____initials
- Contract: Multiple, consecutive contracts pay the fee once; non-consecutive contracts pay each time. _____initials

Student Conduct Review and Records Release for Study Abroad Eligibility

My signature below indicates approval for the Student Conduct Office to release my student conduct record for the purpose of assessing eligibility for study abroad. Conduct information may be shared with Evergreen staff or faculty, or with external partnership professionals if pertinent to the study abroad program or the safety of related staff, faculty, or participants. I understand that this information will be used as one component in considering my suitability for college-approved study abroad.

The information approved for release by my signature includes: the date of the incident(s), violation(s), sanction(s), and status of sanction(s) for which I was found responsible, if any. This release is in effect from the time of application through the completion of this study abroad program.

A minor violation should not negatively affect the outcome of my application. However, a major violation, repeated violations, escalating violations, violations that occur close to the planned leave date for the program, and/or an unresolved sanction(s) may have a negative impact.

Student conduct issues vary from one individual to another. I understand that if I have concerns about my student conduct record, I may discuss those with the Student Conduct Office, the Office of International Programs, or other advisors. I further understand that approval to participate in study abroad programming may include completion of a Behavioral Agreement for Study Abroad, depending on the nature of my student conduct history

Finally, I understand that if I am found responsible for conduct violation(s) after this initial review, I must inform the Office of International Programs immediately.

Student Signature _____ Date: _____

Parent/Guardian Signature, if for a minor. _____ Date: _____



Please turn this completed form into the Office of International Programs (OIP) in one of the following ways:

- **During an OIP visit to your academic program;**
- **Scan and email to Ms. Seel Jang at jangs@evergreen.edu;**
- **Drop it off in person at the OIP offices, Library 2153, inner office Lib 2128 or 2137.**
- **Fax to 360-867-5343, Attention Ms. Seel Jang, OIP**