STUDENT/PARENT (GUARDIAN) ACKNOWLEDGEMENT FORM
FOR PROPOSAL/APPLICATION TO STUDY AWAY
(DOMESTIC PROGRAMS)

Complete the information below. Read and understand the content on this form. All eligible program participants, if under the age of 22, are required to have this form signed by a parent or legal guardian. Return completed form to OIP (faxes are not accepted).

SECTION A: STUDENT INFORMATION

<table>
<thead>
<tr>
<th>STUDENT NAME:</th>
<th>NETID OR SCHOOL ID#:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLASS STATUS:</td>
<td>PHONE NUMBER:</td>
</tr>
<tr>
<td>TERM AWAY:</td>
<td>PROGRAM NAME:</td>
</tr>
</tbody>
</table>

SECTION B: ACKNOWLEDGEMENT OF POLICIES AND PROCEDURES

Read the following sections and understand before signing. Initial in the appropriate column next to each section, print the form and sign in Section C.

Parent Initials | Student Initials | I HEREBY ACKNOWLEDGE THE FOLLOWING:

I authorize the Office of International Programs (OIP) to review my disciplinary and academic records and understand that this Proposal/Application Form will not be approved without clearance of my academic and disciplinary records.

I understand that the OIP reviews the disciplinary and academic records of all applicants and reserved the right to deny approval to any students who have problematic disciplinary histories, including students who are not on disciplinary reprimand or disciplinary probation at the time of application.

I understand that the approval of this Proposal/Application Form is preliminary and I must receive final approval to study away from the OIP and my respective Dean’s Office. Final approval will be given after all required study away forms have been submitted, after I have attended the mandatory pre-departure orientation, and after I have cleared the second disciplinary and academic record checks conducted at the end of the term preceding my departure. I understand that if I do not receive final study away approval from the OIP, I am not eligible to study away.

I understand that if I become ineligible to study away at any time, or if I choose to study away without approval from the OIP or the Dean’s Office, I will not receive academic credit or financial aid for study away and agree that I will not hold Creighton University responsible for any program fees or other monetary losses associated with study away.

I authorize the OIP to place my name, email, major, and study away program information on a study away distribution list, which will be shared with future CU study away participants and applicable Creighton Departments, unless I notify the OIP in writing otherwise.

I agree to comply with the study away eligibility requirements and study away policies administered by the OIP. I have read and understand the student eligibility requirements for study away as outlined below and I understand that if I do not meet these eligibility criteria on a continuous basis, up to the date of my departure for the study away program, I will not be able to study away.

I understand and agree to abide by the following eligibility requirements for study away:

- Students must complete two full semesters on the Creighton (Omaha) campus before going away and must achieve sophomore standing prior to departure.
- First-year (freshman) and transfer students are eligible to apply for study away after completion of one full semester (fall or spring) of study at Creighton. Proposals/Application Forms received prior to the completion of one full semester will be held until completion of the term.
- Minimum cumulative GPA of 2.5, or higher, at the time the Proposal/Application is submitted.
- Good academic standing and satisfactory academic progress toward a degree at Creighton.
- Participation in Creighton’s Pre-Departure Orientation prior to departure.
- Submission of all pre-departure forms and documentation by the Forms Deadline.
- Students must receive final approval to study away from the OIP and from their respective Dean’s Office.
I HEREBY ACKNOWLEDGE THE FOLLOWING:

I understand and agree to abide by the following **disciplinary eligibility requirements** for study away:

On the basis of documentation provided by the Center for Student Integrity, the OIP reviews the disciplinary records of all students seeking study away approval and determines their eligibility to apply and participate in study away.

Students on disciplinary probation are not eligible to apply for or participate in study away programs. They MUST have one full semester (fall or spring) on the Creighton (Omaha) campus, with no additional disciplinary incidents between the end of the probationary period and departure to the host country.

All students seeking approval for study away will have their records checked upon receipt of the Proposal/Application Form and at the end of the term prior to the student’s departure, in order to receive final approval to study away.

I understand that each specific program may have additional eligibility requirements and that it is my responsibility to check with the program or program coordinator to find out this information.

I understand that study away approval is contingent upon maintenance of all study away eligibility requirements as outlined above. Students must also maintain a level of academic eligibility for study away with the college or school of registration. Creighton is **NOT** responsible for any withdrawal fees or other monetary losses incurred by students who become ineligible to study away.

I understand that some elements of a study away program may be inaccessible and that certain limitations may be outside of Creighton University’s control to modify. I understand that if I am approved to participate in a study away program and I believe that I may require accommodations, it is my responsibility to consult with the Office of Disability Accommodations as soon as possible after receiving approval to study away, for their assistance in planning for the study away experience.

Creighton also reserves the right to cancel a Program (or a student’s participation in a Program) in the event of an emergency, an act of God, outbreaks of disease, or other political, natural, technological, or other catastrophes beyond its control. If Creighton cancels a program prior to departure, Creighton will make every effort to retrieve any recoverable costs (any costs Creighton is able to recoup). Unrecoverable expenses cannot be refunded. I understand that it is my responsibility to stay informed about travel warnings concerning the country to which I will be traveling.

I understand that the statements above are some of Creighton’s Study Abroad Policies & Procedures, and are highlighted here to make sure all applicants understand these policies and procedures. I acknowledge that I have read and understood Creighton’s Study Abroad Policies & Procedures applicable to this study away program (found online at: www2.creighton.edu/internationalprograms/studyaway/policiesprocedures).

INITIAL ALL BOXES ABOVE, SIGN BELOW, AND RETURN FORM TO THE OIP (faxes are NOT accepted)

SECTION C: STUDENT SIGNATURE

By signing below, I acknowledge that I have read and understand the information on this acknowledgement form. I certify that the information on my Proposal/Application Form is accurate. I agree to update my Proposal/Application Form if any of the information changes or becomes inaccurate at any time. I acknowledge that any omission or inaccurate information could jeopardize the approval of my Proposal/Application Form. I understand that if I am under the age of 22, I am required to have a parent/guardian complete and sign this form. If for any reason, I am unable to have a Parent/Guardian complete this form, I agree to contact the Study Away Coordinator. I authorize the OIP to contact my parent/guardian, unless I notify the OIP in writing otherwise.

Signature of Traveler: ___________________________ Today’s Date: ___/___/_____

SECTION D: PARENT/GUARDIAN SIGNATURE

I am the parent or legal guardian of the above named student, have read the foregoing acknowledgement form (including such parts as may subject me to personal financial responsibility), and will be legally responsible for the obligations and acts of the student as described in this form, and agree, for myself and for the student, to be bound by its terms. By signing below, I acknowledge that I have read and understand the policies and procedures outlined on this acknowledgement form. I also certify that the student is participating in this Program with my full knowledge and consent. I have read the release form signed by the student and I understand its contents.

Printed Name of Parent/Guardian: ___________________________ Today’s Date: ___/___/_____

Signature of Parent/Guardian: ___________________________ Today’s Date: ___/___/_____