

STUDY ABROAD PETITION FOR PROGRAM APPROVAL NON-PARTNER PROGRAMS

To participate in any **Non-Partner Program**, a student must submit a *Petition for Program Approval(Non-Partner Programs)* to the Office of Study Abroad.

1. Research the course offerings through the provider/host institution, for the term(s) in which you wish to study.
2. Print off or copy course descriptions based on what you'd like to take and what you need to fulfill towards your degree.
3. Be mindful that there may be schedule conflicts or some courses that are not offered during the term in which you plan to visit.
4. Prepare descriptions for at least twice as many courses as you plan to take and then bring the information, along with the *Course Approval Form*, to each appropriate Department Chair on campus to obtain approvals. Course approvals may only be obtained from the Chair of the appropriate department. For example, Spanish courses must be approved by the Chair of the Foreign Languages Department.
5. Complete this Petition/Course Approval Form and turn it in to the Office of Study Abroad, in 1207 Blair Hall. It is a good idea to record on the *Course Approval Form* at least twice as many courses than you are planning to take. Careful planning in the beginning can save you a lot of time in the end.
6. ALL students who study abroad MUST fill out and submit a *Course Approval Form*. If you end up taking a course with no approval, and/or a course not listed on this form, then it will transfer back to EIU as elective credit and will not be eligible to replace major, minor, or general education requirements. You can always amend the form after submission to EIU and until such time as your foreign transcript is processed by EIU.

Name: _____ Major: _____ SSN : _____ EIU ID#: _____

Campus Address: _____

Email: _____ Phone: _____ Major(s): _____ Minor(s): _____

Current GPA: _____ Anticipated Graduation Date: _____ Term/Year you would like to go abroad: _____ # of Weeks: _____

City/Country where you intend to study: _____

Sponsor of Proposed Program: _____ Host of Proposed Program: _____

Website of Proposed Program (exact): _____

Please explain your personal and academic goals for a study abroad experience and why your proposed program will help you meet these goals:

Office Use Only: _____ Approved _____ Not Approved _____ Initials _____ Notes: _____



STUDY ABROAD COURSE APPROVAL FORM

NON-PARTNER PROGRAMS

Phone: (217) 581-7267
Fax: (217) 581-7299

Name: _____ Major: _____ SSN : _____ EIU ID#: _____

Program Sponsor//Host Institution: _____ City/Country: _____

Study Abroad Term(s): _____ Total # of Courses you plan to take: _____ Semester Hours: _____ Honors Student? (Circle one) Yes No

Foreign Course/Study Abroad Num & Title	EIU Equivalency or Substitution Num & Title	*Cr Hrs	Div (U/L)	Lab (Y/N)	Maj	Min	GED	Approving Chair's Printed Name & Signature	Date

Student Agreement

1. It is my responsibility to enroll in courses at the host institution, complete the courses in which I enroll, and have a transcript sent to the Office of Study Abroad upon completion.
2. It is my responsibility to inform my Academic Advisor and the Office of Study Abroad of any changes in my course schedule, and to seek the appropriate course approvals.
3. I understand that all the courses that I take at this host institution will transfer as graded EIU credit, and will appear on my EIU transcript, if this petition is approved.

Student's Signature Date

I have viewed this intended curriculum for this student and flagged him/her for registration.

Academic Advisor's Name/Signature Date

*Note, Cr. Hrs. is the number of credit hours "recommended" by the Chair. Actual credit hours will be determined by standard Illinois foreign credential evaluation procedures.

Study Abroad Rep's Signature Date

**Host Institution Agreement
(Non-Partner Programs)**

The Board of Trustees of Eastern Illinois University and

_____ (hereinafter Host)
[Host Institution or Provider Responsible for the Student]

agree as follows:

Host acknowledges that _____ (hereinafter Student) is seeking a degree through EIU. Upon acceptance of this agreement, Student will be permitted to earn academic credit through Host, which can be applied toward EIU degree requirements, pursuant to its academic policies and procedures, as amended. Host agrees:

1. To notify EIU if Student withdraws from the program or decreases enrollment before its conclusion and also to notify EIU of any known grants or scholarships that Student receives from non-EIU sources.
2. To forward to EIU transcripts of all coursework completed at or through Host by Student, within thirty (30) days after the completion of coursework.
3. To arrange and conduct a comprehensive on-site orientation program for Student. This program shall include but not be limited to information concerning any known, abnormally dangerous conditions on the premises or in the host city or country, such as the threat of crime, terrorism, civil unrest or disease.
4. To ensure that Student is granted the same rights and privileges within the Host Institution as its own degree-seeking students, including but not limited to access to available health, dental or counseling services, the Student Union, if any, and athletic/fitness facilities.
5. To immediately notify EIU of any known accident, illness, injury, death, adjustment difficulties, academic/behavior problems, arrest, significant absenteeism, alteration in the number of credit hours, or emergency involving Student.

<p>Main Office Office of Study Abroad 1207 Blair Hall Charleston, IL 61920 Phone: 217-581-7267</p>	<p>Wendy Williamson Director of Study Abroad Telephone: 217-581-3390 Email: wwilliamson@eiu.edu</p>	<p>Farhan Aziz Coordinator of Study Abroad Telephone: 217-581-7267 Email: faziz@eiu.edu</p>
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6. To train and require all employees, faculty, staff and host family members to immediately report to EIU, in writing, any complaints alleging sexual harassment, discriminatory harassment or discrimination of any kind.
7. To adhere to all applicable laws, statutes, court decisions, ordinances and codes, including but not limited to fire safety codes, building codes, safety codes and zoning ordinances or their foreign equivalents, in performing its obligations arising out of this agreement. Host hereby represents and warrants that all academic facilities utilized by Student will be in compliance with the foregoing requirements at all times during the term of this agreement or any extensions hereof.

The Host Institution agrees to indemnify, defend and hold harmless the Home Institution and its officers, trustees, employees and agents from and against any and all claims, damages, actions, causes of action, judgments and expenses, sustained, claimed or alleged by any person, firm or entity, in connection with or as a

result of the programs contemplated hereunder, or by reason of any of the acts or omissions of the Host Institution or its employees, officers, directors, host family members, representatives, contractors, vendors or agents; including, without limiting the foregoing, those claims, actions and causes of action alleging personal injury, death, property damage, negligent supervision, negligent hiring, unlawful discrimination or any other claims or actions relating to, connected with or arising during the term of this Agreement or any program contemplated hereunder.

In the performance of the services contemplated herein, neither the Host Institution nor its employees or agents shall be considered employees, agents, partners or joint venture partners of the Home Institution; rather, the relationship between the parties to this Agreement shall be that of an independent contractors. The undersigned parties agree that the Home Institution shall have no control over the day-to-day operations of the academic programs contemplated herein. The Host Institution shall control the manner, means and methods of the performance of its obligations under this Agreement.

The Host Institution/Provider agrees to designate the following individuals and/or positions to oversee and facilitate implementation of this agreement in cooperation with other appropriate administrators:

Insert Full Contact Information:	Insert Full Contact Information:
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Signature/Date: _____

Name: _____

Title: _____

Address: _____

Phone: _____

Fax: _____

Email: _____