

SOC 103 Sustainability & Society - Italy
2020 Study Abroad Enrollment Application
Semester/Travel Dates: Spring 2020/May 15 – 26, 2020
Study Abroad Travel Expense: \$3500.00
Faculty Leader/Email: Dan Kasper dkasper@dtcc.edu
Application Deadline: Friday, November 22, 2019*



PARTICIPANT INFORMATION

Name <i>(as it appears on passport)</i>		First:	Middle:	Last:
Address:				
City:		State:		Zip Code:
Home Phone:		Cell Phone:		E-mail:
DELAWARE TECH ID #:			Current GPA:	
Campus Location: <input type="checkbox"/> George <input type="checkbox"/> Stanton <input type="checkbox"/> Terry <input type="checkbox"/> Owens <input type="checkbox"/> Other				
I currently have a valid passport: <input type="checkbox"/> Yes <input type="checkbox"/> No			Gender: <input type="checkbox"/> M <input type="checkbox"/> F	
Passport Country:		Passport #:		DOB (mm/dd/yyyy):
Passport Valid Date (mm/dd/yyyy):		Passport Expiration Date (mm/dd/yyyy):		Degree Seeking Student: Y/N If yes, major:

**** (include a copy of the photo page of your passport with this application)**

EMERGENCY CONTACT INFORMATION (1st CONTACT)

Name		First:	Middle:	Last:
Relationship:			Cell Phone:	
Home Phone:		Work Phone:		E-mail:
Address:				
City:		State:		Zip Code:

EMERGENCY CONTACT INFORMATION (2nd CONTACT)

Name		First:	Middle:	Last:
Relationship:			Cell Phone:	
Home Phone:		Work Phone:		E-mail:
Address:				
City:		State:		Zip Code:

*Applications may be accepted after the application deadline, pending availability.

ACCEPTANCE REQUIREMENTS

Participants must be at least 18 years of age, a degree-seeking student at Delaware Technical Community College or other academic institution, possess a minimum 2.0 GPA, and be in good academic standing (if individual is a first-semester student without an established GPA two letters of recommendation from faculty are required). Participants must comply with the Standards of Student Conduct and be approved for participation by the Dean of Student Affairs. Note: Students with disciplinary records will not necessarily be excluded from study abroad; however, Delaware Tech reserves the right to deny acceptance to the study abroad program for any student who may present a risk to self or others while abroad. Exceptions to the above policies may be made on a case-by-case basis by the Vice President for Academic Affairs upon the recommendation of the International Education Director.

I certify that all questions on this application are true and complete to the best of my knowledge. I agree to submit all required information and documents. Further, I understand that consideration for this course may be denied if any information is found to be incomplete or inaccurate. I authorize Delaware Technical Community College to obtain the information necessary to process this application from my student records, and to submit my name to the Dean of Student Affairs for a disciplinary record review prior to my acceptance to the study abroad course.

Participant Signature

Date

WAIVER OF BUCKLEY AMENDMENT RIGHTS (FERPA WAIVER)

I, _____, give my permission to administrators and faculty in study abroad leadership positions at Delaware Technical Community College to speak with my emergency contacts listed on the course application regarding aspects of my participation in a study abroad course, including medical emergencies, legal incidents, and disciplinary issues.

Participant Signature

Date

IMPORTANT FINANCIAL AND ACADEMIC INFORMATION *(please read carefully)*

Study Abroad Travel Expense: \$3,500.00

Refund Cut-Off Date: DATE (90 days prior to departure)

Payment	Due on or before	Amount Due	Total Due
Non-Refundable Deposit	Friday, Nov. 22, 2019	\$200.00	\$200.00
2	Friday, Dec. 13, 2019	\$1000.00	\$1200.00
3	Friday, Jan. 17, 2020	\$1000.00	\$2200.00
4	Friday, Feb. 14, 2020	\$650.00	\$2850.00
Final Payment	Friday, March 13, 2020	\$650.00	\$3500.00

- Failure to make a payment on time may result in the participant being removed from the course without a refund if it is 90 days or less prior to departure. Students with unpaid balances at the time of travel will not be permitted to participate in the travel portion of the program.
- The Study Abroad Travel Expense does not include the following: books, passport and visa fees, immunizations, personal expenses, tuition/student service/registration/technology fee, and anything not specified as included in the course brochure.
- For study abroad courses with travel dates departing in May 2020, students will receive an “I” for the course at the end of spring semester and will be awarded their grade after travel and all coursework is completed. **Note: students who need this course credit in order to graduate will not be certified to receive their diplomas and will not be able to walk in May 2020 graduation ceremonies.** After all graduation requirements are met, students will be certified as having completed all graduation requirements and may participate in May 2021 graduation ceremonies.
 - I understand the above paragraph regarding graduation requirements.
 - NO, I am NOT scheduled to graduate in May 2020.
 - YES, I am scheduled to graduate in May 2020. If yes,
 - I do need this course/credit to meet my graduation requirement for May 2020.
 - I understand the above paragraph regarding graduation requirements, and I do not need this course/credit to meet my graduation requirements for May 2020.

Cancellation and Refund Policy

Participants must inform the College in writing via e-mail at taryn.tangpricha@dtcc.edu if they choose to cancel their participation in the course. All correspondence should be addressed to Taryn Tangpricha, International Education Director. **Participants are not considered to be cancelled from the course until the date that the above communication is received.**

Applicants must understand that Delaware Tech is required to make early deposits to reserve accommodations, air tickets, in-country travel, etc. **For this reason, prior to the 90-day cut-off date, participants will be refunded Study Abroad Travel Expense payments made minus the \$200 non-refundable deposit and any expenses already paid by the College on the participant’s behalf. After the 90-day cut-off, no refunds will be given, and participants are responsible for the full balance due.** Please refer to the Tuition/Fee Adjustment policy located in the Student Handbook for information regarding course withdrawals.

DTCC will periodically assess enrollment, safety, and other factors. **Students acknowledge that Delaware Tech has the right, at any time and without liability or cost therefore, to cancel the course.**

I certify that all information submitted on this application is true and complete to the best of my knowledge, and that I have read and understand the payment, refund, and cancellation information on the following pages. I consent for Delaware Technical and Community College and/or the faculty leader to speak with my emergency contacts listed on the application regarding aspects of my participation including medical emergencies and legal incidents.

Participant Signature

Date

Study Abroad Additional Information Form

Please complete the information below. All answers are confidential and will be destroyed at the conclusion of the program year.

Question:	Answer (Please Complete):
<p>Please describe any medical or mental health services/accommodations might you require while abroad.</p>	
<p>List any medications you are currently taking, or will be taking during your time abroad</p> <p>(if none check here <input top;"="" type="checkbox>):</p> </td> <td></td> </tr> <tr> <td style=" vertical-align:=""/> <p>List any allergies you have to medication:</p> <p>(if none check here <input 32="" 480="" 721"="" 953="" data-label="Text" type="checkbox>):</p> </td> <td></td> </tr> </tbody> </table> </div> <div data-bbox="/> <p>I understand the essential elements of participating in the program and have read the course itinerary. I represent that I am able to fully take part in the essential elements of the course, including the travel abroad portion. If I believe that I am in need of reasonable accommodation in order to fully take part in the essential elements of the program, I will contact Delaware Tech's ADA Campus Contact and complete an accommodation evaluation in such a reasonable time-frame so as to allow for satisfactory evaluation of the requested accommodation and adequate time to implement the accommodation, if any. I will consult with and inform the International Education Director of any accommodation to be requested as a result of that evaluation. I will disclose to Delaware Tech any health condition, to the extent that it may affect my safety and welfare or that of other program participants. Any information provided to Delaware Tech with respect to my health shall be used solely for the purposes of my involvement with this specific education abroad program and shall be treated confidentially, except to the extent that disclosure is needed to secure health care or disability accommodation. If in the course of the program, the International Education Director and/or the Delaware Tech employee(s) leading the course should determine in his/her good faith judgment that my or others' health, safety, or welfare, or the integrity of the program is jeopardized by my health condition, I agree to withdraw from the program or any portion thereof. If necessary, I will return to the United States at my expense.</p> </p></p>	

I understand that providing this information does not obligate Delaware Tech to provide any medication and/or services.

Participant Signature _____

Date _____

Participant Name (Print clearly)

Italy SOC 103 Sustainability & Society
Course Number/Title

I understand and hereby acknowledge that my participation in the Program is wholly voluntary. Delaware Technical and Community College (DTCC) has agreed to let me participate in the program and I, in turn, agree to the following:

1) Risks of Education Abroad

I understand that participation in the Program involves risks, hazards, and dangers not found in the study at my home campus. I am aware of, understand, acknowledge, appreciate that these risks, dangers, and hazards involve traveling to and within, and returning from, one or more foreign countries, including risks of air travel and all other types of transportation that could result in damage to property, injury to persons, or death; foreign political, legal, social, and economic conditions; different standards of design, safety and maintenance of utilities, including computing facilities, buildings, public places and conveyances; and local sanitation, medical, and weather conditions. I am aware of, understand, acknowledge, and appreciate the risks, hazards, and dangers of travel to, in and around the host country, including but not limited to the dangers to my own health and personal safety, including loss of property, personal injury, or death posed by war, terrorism, crime, civil unrest, kidnapping, illness, public health risks, accidents, and/or violence.

Applicable current travel advisories issued by the U.S. Department of State and the Center for Disease Control information materials either have been received or Internet site addresses provided to me. Further, I have made my own investigation and I am willing to accept these risks, hazards, and dangers.

2) Health and Safety

- a) I hereby represent and warrant that I am and will be covered throughout the Program by a policy of comprehensive health and accident insurance, which provides comprehensive health and accident insurance policy for injuries and illnesses I sustain or experience overseas, and, more specifically, in the country that I will be living and/or traveling while on the Program, as well as emergency evacuation and repatriation of remains insurance. I understand that my participation in this Program carries with it an emergency travel assistance policy. The policy provides modest accident and sickness insurance, emergency evacuation and repatriation of remains during my participation in the Program. This insurance is considered supplemental and should not take the place of other insurance. I hereby represent and warrant that my health insurance policy will adequately cover me while outside the United States. I agree to report to the International Education Coordinator on my campus any physical or mental condition I have, which may require special medical attention or accommodation during the Program as early as possible, but no later than thirty (30) days prior to departure from the U.S.
- b) I acknowledge and recognize that DTCC is not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility therefore. If I require medical treatment or hospital care, in a foreign country or in the United States, during my participation in the Program, DTCC is not responsible for the cost or quality of such treatment or care. DTCC may (but is not obligated to) take any actions it considers to be warranted under the circumstances regarding my health and safety. I agree to pay all expenses related thereto and hereby release DTCC from any liability for any such actions.

3) Changes to Program and Responsibility

- a) I understand and acknowledge that DTCC does not represent or act as an agent for, and cannot control the acts or omissions of, any host institution, host family, transportation carrier, hotel, tour organizer, or other provider of goods or services relation to the Program.
- b) I understand and acknowledge that DTCC reserves the right to make changes to the Program (including equipment substitutions or alterations in the proposed itinerary) at any time and for any reason, with or without notice, and DTCC shall not be liable for any loss whatsoever to me by reason of any such cancellation or change. DTCC is not responsible for penalties assessed by air, land, water carriers and/or other transportation that may result due to operation and/or itinerary changes, regardless of whether DTCC makes such arrangement. DTCC, reserves the right to substitute hotels or accommodations or housing of a similar category at any time. Specific room and housing assignments are within the sole discretion of DTCC.
- c) I acknowledge and understand that in the event I choose to travel separately, become detached from the Program group, fail to meet a departure bus, airplane, or train, or become sick or injured, I will bear all responsibility to seek out, contact, and reach the group at its next available destination; and that I will bear all cost attendant to contacting and re-joining the Program.
- d) I understand and acknowledge that DTCC assumes no responsibility or liability, in whole or in part, for: any delays, delayed or changed departure or arrival times; fare changes, dishonors of hotel, airline or vehicle rental reservations; missed carrier connections; sickness, disease, injuries (including death), losses, damages, weather, strikes, acts of God, circumstances beyond the control of DTCC, force majeure, war, quarantine, civil unrest, kidnapping, public health risks, criminal activity, terrorism, expense, accident, injuries, damage to and lost property; bankruptcies of airlines or other service providers; inconveniences, cessation of operations, mechanical defects, failure or negligence of any nature howsoever caused in connection with any accommodations, restaurant, transportation, or other service or for any substitution of hotels or of common carriers beyond DTCC's control, with or without notice; or for any additional expense occasioned by any of the foregoing. If due to weather, flight schedules or other uncontrollable factors I am required to spend additional nights, DTCC will not be responsible for my hotel, transfers, meal costs or other expenses. My baggage and personal property are transported at my risk entirely.
- e) The right is reserved by DTCC, in its sole discretion, to cancel the Program or any aspect thereof prior to departure; and, in DTCC's sole discretion to cancel the Program or any aspect thereof after departure, requiring that all participants return to the United States if DTCC determines or believes that any person is or will be in danger if the Program or any aspect thereof is continued. If the Program is changed or cancelled, the only responsibility of the Program is to refund to me all uncommitted monies and deposits I have paid to the program. If changes in the Program are minor, the Program does not have to refund any amounts to me.

4.) Independent Activity

I understand that if I spend any time away from the Program's location, or participate in any activity that is not a planned part of the program (such as a field trip) that I will advise the Program Leader. I hereby represent and warrant that my participation in these activities is not required by DTCC and is wholly voluntary. I understand and hereby acknowledge that I may face additional and/or increased risk of injury or death due to civil unrest, violence, terrorism, crime, illnesses, kidnapping, or political instability by engaging in activities outside the Program agenda. I hereby assume, knowingly and voluntarily, each of these risks and all other risks that could arise out of or occur during my activities.

5) Standard of Conduct

- a) I understand and acknowledge that DTCC's policies on Alcohol, Drug Use, Sexual Harassment, and the Student Rights and Standards of Student Conduct policies apply whether I am on the home campus or abroad. I also agree to abide by these policies.

- b) I understand and acknowledge that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, drug use, and behavior. I recognize that behavior, which violates those laws or standards, could harm DTCC's relations with those countries and the institutions therein, as well as my own health and safety. I will become informed of, and will abide by, all such laws and standards for each country to or through which I will travel during my participation in the Program, including attending any and all Program orientation meetings and reading all materials the Program provides. I will attend to any legal problems I encounter with any foreign nationals or government of the host country or any country to or through which I travel during my participation in the Program. DTCC is not responsible for providing any assistance under such circumstances.
- c) I understand and acknowledge that the Lead Instructor(s) will be the sole judge of whether my actions hurt the Program, myself or others in the Program or seriously offend the host culture. If they do, the Lead Instructor(s) may terminate my participation in the Program. I understand and acknowledge that, should my participation in the Program be terminated, I will receive no refund of any fees; I am required to leave the Program immediately; and that I am solely responsible for arranging and paying for my own transportation back to the United States.

6) Reproduction of Records

The Program may reproduce and use for educational and/or promotional purposes without compensation all photographs, videos, movies, or sound recordings taken of me during the time I participate in the Program, as well as any statements made in surveys regarding the Program.

7) Assumption of Risk and Release of Claims

Knowing the risks, dangers, and hazards described above, and in consideration of being permitted to participate in the Program, I agree, individually, and on behalf of my heirs, successors, assigns and personal representatives, to assume all the risks, dangers, hazards, and responsibilities surrounding my participation in the Program. To the maximum extent permitted by law, I, individually, and on behalf of my heirs, successors, assigns and personal representatives, hereby release and forever discharge DTCC and its employees, agents, officers, trustees and representatives (in their official and individual capacities) from any and all liability whatsoever, which arise as a result of negligence on the part of DTCC, for any and all damages, losses or injuries (including death) I sustain to my person or property or both, including but not limited to any claims, demands, actions, causes of action, judgments, damages, expenses and costs, including attorney fees, which arise out of, result from, occur during or are connected in any manner with my participation in the Program, any related or independent travel, any activities or field trips, irrespective of whether they are sponsored, supervised or controlled by DTCC, and which arise as a result of negligence on the part of DTCC, its employees, agents, officers, trustees or representatives (in their official and individual capacities).

8) Indemnification and Hold Harmless

I, individually, and on behalf of my heirs, successors, assigns and personal representatives, hereby agree to indemnify, defend and hold harmless DTCC and its employees, agents, officers, trustees and representatives (in their official and individual capacities) from any and all liability, loss, damage or expense, including attorney fees, that may result from my negligent or intentional act or omission, which arise out of, occur during, or are in any way connected with my participation in the Program, any related or independent travel, any activities or field trips, irrespective of whether they are sponsored, supervised or controlled by DTCC.

I agree that this Waiver, Release and Indemnification is to be construed and governed under the laws of the State of Delaware, U.S.A.; and that if any portion hereof is held invalid, the balance hereof shall, notwithstanding, continue in full legal force and effect. In signing this document I hereby acknowledge that I have read this entire document, that I understand its terms, that by signing it I am giving up substantial legal rights I might otherwise have, and that I have signed it knowingly and

voluntarily. I represent that my agreement to the provisions herein is wholly voluntary, and I further understand that, prior to signing this agreement, I have the right to consult with the adviser, counselor, or attorney of my choice.

I am at least eighteen years of age.

MY SIGNATURE INDICATES THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT AND THAT I AGREE TO EVERYTHING STATED IN IT. FURTHER, NO REPRESENTATIONS, STATEMENTS, OR INDUCEMENTS, ORAL OR WRITTEN, APART FROM THE FOREGOING WRITTEN STATEMENT, HAVE BEEN MADE. MY SIGNATURE ALSO INDICATES THAT I AM AWARE OF ANY SPECIAL RISKS, DANGERS, AND HAZARDS INVOLVED IN THE PROGRAM.

Participant Name (printed)

Participant Name (signature)

Date

APPLICATION STEPS CHECKLIST:

All additional information and resources for parents and students preparing for study abroad are located on the study abroad website at go.dtcc.edu/studyabroad.

1. Contact the course faculty leader to schedule an applicant/instructor interview.
2. Schedule an appointment for an advising session with your campus IEC. Complete and sign this application prior to the session. Please bring your \$200 non-refundable deposit to this appointment, and be prepared to register for the course and make the deposit payment for the Study Abroad Travel Expense. At this appointment, you will:
 - a. Participate in a 20 minute interview regarding the study abroad experience and expectations. Review the application materials, and submit your signed application. *NOTE: Include a clear photocopy of your passport picture page with the application. If you do not have a valid passport, you must apply IMMEDIATELY at <http://www.travel.state.gov> (this may take up to 4-6 weeks). Students traveling on non-U.S. passports should check the country's embassy webpage to see if they need a visa in addition to a passport for the country.
 - b. Obtain the drop/add form and payment vouchers for the course.
 - c. Visit the Registrar's Office (IEC will accompany you) to enroll in the course.
 - d. Visit the campus Business Office to make \$200 non-refundable deposit.
3. After completing steps 1 and 2, you are now considered an enrolled participant in the study abroad course. Submit your study abroad travel expense payments at the Business Office according to deadlines listed below. You may make payment arrangements at the Business Office (choose from the following options: pay in full, installment plan, 3rd party, or financial aid authorization).
4. If applying, complete and submit the online applications for scholarships for study abroad prior to the December 20, 2019 deadline, located on the MyDTCC Portal in "Resources" under "Scholarship Application" or here: https://dtcc.academicworks.com/users/sign_in.
5. Attend one of the mandatory Health and Safety Orientations (in February/March 2020) and all required classes scheduled for your course. You must fulfill all requirements of your course and complete assignments and coursework on time, or you may jeopardize your ability to travel abroad with the group. Read the *Study Abroad Student Handbook* to help you prepare and communicate regularly with your instructor(s).

Study Abroad Travel Expense: \$3,500.00

Refund Cut-Off Date: DATE (90 days prior to departure)

Payment	Due on or before	Amount Due	Total Due
Non-Refundable Deposit	Friday, Nov. 22, 2019	\$200.00	\$200.00
2	Friday, Dec. 13, 2019	\$1000.00	\$1200.00
3	Friday, Jan. 17, 2020	\$1000.00	\$2200.00
4	Friday, Feb. 14, 2020	\$650.00	\$2850.00
Final Payment	Friday, March 13, 2020	\$650.00	\$3500.00

Ask us if you need help! For questions or additional information, please contact:

Marissa Lelii (Wilmington Campus)

mlelii@dtcc.edu

(302)571-5355 / Office Location: SE 308

Victoria Chang (Dover Campus)

victoria.chang@dtcc.edu

(302)857-1349/ Office Location: Terry Building 122F

Dan Kasper (Stanton Campus)

dkasper@dtcc.edu

(302)292-3806 / Office Location: F116

Amy Russell (Georgetown Campus)

amy.russell@dtcc.edu

(302)259-6589/Office Location: ASC 303

Taryn Tangpricha (International Education Director- all campuses)

taryn.tangpricha@dtcc.edu

(302)857-1829 / Office Location: Office of the President, Suite 300, Office 123, Dover Campus