



Molise Italian Studies

Adult Study Abroad & Community-Based Global Learning

Thank you for applying to our program!

Application Instructions:

1. Make sure you have filled out and submitted the online application (at <https://www.moliseitalianstudies.com/enrollment-semester-summer/>)
2. Print this packet.
3. Complete all the forms and return them by email or post (**along with an official or unofficial transcript**) to:

info@moliseitalianstudies.com

OR

Molise Italian Studies
c/o Scott Holcomb
6367 W. 75th Dr.
Arvada, CO 80003

Application Packet Forms

- Health Examination Form
- Study Abroad Advisor's Form (if applicable)
- Official Transcript Request Form (if necessary)
- Waiver/Release



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Health Examination Form

(This form must be completed, signed and dated by a physician)

Applicant's Name: _____ DOB: _____

Applicant's Height: _____ Weight: _____

If the answer to any of the questions below is "Yes," the physician should provide details on the last page, indicating in each case whether the conditions is likely to affect the applicant's full participation in the study abroad program.

QUESTION	YES	NO
1. Is the applicant seriously underweight or overweight?		
2. Does the applicant have any dietary restrictions or food allergies?		
3. Is the applicant allergic to any medications?		
4. Does the applicant suffer from any other type of allergy?		
5. Does the applicant have any speech, hearing or eyesight impairment which might affect his/her participation?		
6. Does the applicant have any physical disability which might cause hardship in the event of changes in diet or strenuous travel?		
7. Does the applicant have any existing congenital condition that may require additional treatment?		
8. Is the applicant currently under treatment or observation for any physical or emotional condition?		
9. Is there any history of emotional disturbance in the applicant?		
10. Has he/she shown any of the following:		
a. difficulties in relationships with family/peers?		
b. behavior disorders?		
c. eating disorders?		
d. symptoms such as mood swings, depression, sleep disorders, unusual degree of anxiety, fear or guilt?		
11. Does the applicant have any communicable infectious diseases?		
12. Is the applicant full vaccinated against Covid-19?		
13. To your knowledge, are there any predisposing medical or emotional factors which may, under stress or duress during the course of the study program, present a need for immediate therapy while abroad?		
14. Do you consider the applicant to be generally in good enough physical and mental health to participate in this study abroad program?		

Please list medications the applicant is presently taking:

Comments/Explanations:

Physician's Name: _____

Signature: _____

Date: _____

Phone: _____

Address: _____

Once completed and signed by the physician, the applicant should return, by email or post, to the address indicated on the first page of this packet.



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Study Abroad Advisor's Form

Part 1: to be completed by the applicant.

Applicant's Name: _____ Term Applying For: _____

I hereby authorize _____ to complete this form. I understand this document will be used to evaluate my qualifications for the Molise Italian Studies Program and will be part of my application file.

Applicant's Signature: _____

Part 2: to be completed by the Study Abroad Advisor or Dean. Please enclose a letter addressing the following points. Thank you for your help.

1. Is this student in good standing academically and otherwise at your institution? If not, please explain.
2. Has this student obtained the necessary approval(s) from your institution to participate in the Molise Italian Studies Program for the period indicated above? If not, or if the approval(s) is conditional, please explain why.
3. Will this student be able to transfer credit toward his or her degree requirements at your institution for course work successfully completed in the Molise Italian Studies Program? (If you need more information from us to determine this, please indicate so here.)
4. Do you recommend this student for the Molise Italian Studies Program on the basis of his/her motivation, stability, maturity, and probable capacity to adjust to life in Italy (or another culture generally)?

Name of Study Abroad Advisor or Dean: _____

Signature: _____

Date: _____

Phone: _____

Address: _____

Once completed, please email this form and the attached letter to info@moliseitalianstudies.com.



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Official Transcript Form

Part 1: to be completed by the applicant. After complete, submit this form to your institution's registrar.

Applicant's Name: _____ Term Applying For: _____

Student ID (or Social Security Number): _____

Email: _____ Phone: _____

Address: _____

I hereby request an official transcript be sent to Molise Italian Studies.

Applicant's Signature: _____ Date: _____

Part 2: for the Registrar. Thank you for your help. Please send an official transcript by email or post to:

info@moliseitalianstudies.com

OR

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c/o Scott Holcomb
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Official Waiver/Release

Applicant's Name: _____ Term Applying For: _____

This is a legally binding contract between the participant and Molise Italian Studies. This agreement contains the terms and conditions that govern the parties' relationship. The term "Undersigned," as used in this agreement refers to participant. By agreeing to the terms of this contract and by signing at the end of this contract, you consent to the terms herein.

I. WAIVER

This program involves studying with Molise Italian Studies and its program partners, and includes living with a host family. Group excursions and social/cultural activities are routinely offered to participants. Some trips will be overnight and most will involve transportation on a bus and/or train. The Undersigned fully understands that there are certain dangers, hazards, and risks inherent in international travel, the group excursions, and in the activities included in the Molise Italian Studies program, and has signed this document in full recognition and appreciation of the dangers of these activities, which dangers include, but are not limited to, physical injuries (minimal, serious, catastrophic) and/or property loss or damage. The Undersigned expressly acknowledges that the participant is not required to participate in the Molise Italian Studies program, but chooses to do so.

The Undersigned therefore agrees to assume and take on all responsibilities in any activities associated with the Molise Italian Studies program. In consideration of, and in return for, the service, facilities and other assistance provided to participants by Molise Italian Studies, we, along with any of our assignees, heirs, distributees, guardians, and legal representatives, release Molise Italian Studies and its partner institutions from any and all liability, claims and actions that may arise from injury, harm or death to the Undersigned and from loss or damage to the Undersigned's property in connection with these activities. The Undersigned understands that this release covers liability, claims and actions caused entirely or in part by any acts or failure to act by Molise Italian Studies, including but not limited to negligence, mistake, or failure to supervise by Molise Italian Studies or any damage to property that occurs during non-Molise Italian Studies travel or activities.

Initials (to acknowledge and agree to the Waiver) _____

II. CODE OF CONDUCT

All participants in the Molise Italian Studies program are required to abide by all rules, regulations and procedures established by Molise Italian Studies and its partners. As a representative of your home college or university and your native country, your conduct abroad plays a significant role in the cross-cultural experience.

A successful program of immersive and transformative service learning includes:

- Immersing yourself in the Italian language
- Immersing yourself in the local community—being respectful of the local culture and traditions, getting involved through a local sports team or musical group, community service events, tutoring or other part-time employment, religious ceremonies, etc.
- Active and regular participation in courses and academic activities
- Participating in cultural activities and excursions offered by Molise Italian Studies
- Being prepared and familiarizing yourself with your surroundings

Molise Italian Studies reserves the right to place a participant on probation and/or to dismiss a participant from the program on the basis of conduct that causes concern for the student's safety and well-being or for the safety and well-being of others.

Molise Italian Studies has a zero-tolerance policy regarding excessive alcohol consumption (drunkenness), or abuse of prescription or illegal drugs. If, by any means, the Molise Italian Studies on-site staff becomes aware that you have engaged in excessive consumption of alcohol or use of illegal drugs, you will be immediately subject to probation or expulsion from the program. Molise Italian Studies strongly encourages you to avoid situations in which excessive alcohol consumption and/or drug use is present.

Information regarding conduct found to be disruptive to the Molise Italian Studies program may be released to your home institution's study abroad office. This conduct includes, but is not limited to:

- Violation of local laws
- Actions that, in the opinion of Molise Italian Studies, jeopardize your welfare or the welfare of others
- Damage to, or destruction of, school, residence, or student property
- Reckless or dangerous behavior
- The use of threats or physical violence
- Excessive alcohol consumption, substance abuse or use of illegal drugs
- Excessive absence from classes and academic activities

Initials (to acknowledge and agree to the Code of Conduct) _____

III. TRANSCRIPT RELEASE/SECURITY DEPOSIT REFUND

Molise Italian Studies reserves the right to withhold a transcript in the case of unpaid balances due to Molise Italian Studies. Security deposits and any other monies held will be refunded in full within 90 days of the end of a term minus any housing damages or unpaid balances due to Molise Italian Studies or any agent, contractor or program partner. Transcripts will be released once all accounts are paid in full.

Initials (to acknowledge and agree to the Transcript Release/Security Deposit Refund Policy) _____

IV. CANCELLATIONS AND REFUNDS

Cancellation

Arrival day is considered the start of the term. The confirmation deposit is not refundable at any time. Further program cost liability is based on the date on which Molise Italian Studies receives a cancellation request. If a cancellation request is received 36 or more days before arrival day, a full refund is provided (minus the non-refundable confirmation deposit). If a cancellation request is received 35 days or less before check-in day, participants are liable for the following penalties:

- 35 days before the start of program – 1 days before the start of program: 50% of program fee
- Day of program start or after: 100% of program fee

Enrollment Deferment

Participants who have confirmed their enrollment with payment of program deposits may defer their enrollment to a future term that starts within one calendar year of the original term by submitting a non-refundable \$300 deferment administrative fee. The deferral request must be received 61 days or more prior to the original program start date. Participants who subsequently cancel their enrollment for the new term are liable for the enrollment cancellation penalty of higher value (either the original or current term).

Refunds

Refunds are issued within 4 weeks of cancellation, in the same form the payment was made (check, credit card, or e-check). Refund checks are issued to the participant (unless requested otherwise), while credit card and e-check refunds are issued to the card used for the payment.

Withdrawal After Program Has Begun

Participants who must withdraw from Molise Italian Studies after the program has begun should follow these steps:

- Contact Molise Italian Studies staff to discuss the reasons for withdrawing and inform us of the exact date and time of departure.
- Contact the home university (if applicable) to discuss any financial or academic consequences (i.e. participants who have received financial aid may have to repay it; participants may have to add another semester in order to graduate). Submit to Molise Italian Studies proof of contact with home school advisor. Complete any forms and permissions for withdrawal required by host university.
- Complete the Molise Italian Studies Official Withdrawal Form.
- Turn in house key to host family.

Participants who withdraw after the program has begun are not entitled to refunds, reimbursements or credit of any kind. In accordance with the Molise Italian Studies Cancellation and Refund Policy, all program fees are non-refundable once the program has begun.

Initials (to acknowledge and agree to the Cancellations and Refunds Policy) _____

V. TRAVEL AND ENTRY REQUIREMENTS

It is the sole responsibility of the participant to ensure that all necessary travel documents and visas are procured and in their possession prior to program start. Molise Italian Studies will provide advice and assistance with travel and visa requirements, but participants assume complete and full responsibility for verifying any and all entry requirements and obtaining a student visa if required. Failure to meet any travel requirements, including obtaining a visa if required, is not considered the basis for a refund of fees.

Initials (to acknowledge and agree to the Travel and Entry Requirements) _____

VI. PARENT/GUARDIAN COMMUNICATION

I give Molise Italian Studies permission to speak with my parent(s) or guardian(s) regarding any matters, including financial matters, that may arise related to my enrollment and participation in the Molise Italian Studies program.

Signature (regarding Parent/Guardian Communication) _____

VII. FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA) RELEASE

I understand that under the provision of the Family Educational Rights and Privacy Act (FERPA), 20 USC Section 1232g, my records at Molise Italian Studies cannot be released to a third party without my approval. Molise Italian Studies must have signed consent from me before educational information can be released to a third party. This waiver will be used in conjunction with the Molise Italian Studies programs only. I hereby grant permission to authorized personnel at Molise Italian Studies to release my academic and other records described below and/or the information contained therein to my Home institution, parents or legal guardians, and all appropriate U.S. and foreign governmental agencies. The purposes of this release are to keep Molise Italian Studies and my home institution advised of my progress in the Molise Italian Studies program and to permit Molise Italian Studies to provide information as requested or required by U.S. and foreign governmental agencies. The records and information I authorize to be disclosed by Molise Italian Studies are:

- Academic transcript or other records relating to my academic performance;
- Records reflecting disciplinary issues, sanctions or proceedings;
- Information regarding health, medical or emergency situations during my study abroad program;
- Records reflecting financial aid and student accounts affecting my status at Molise Italian Studies;
- Other personally identifiable information as deemed necessary by Molise Italian Studies.

I understand that by signing this release form I am voluntarily waiving certain rights granted to me by FERPA. Furthermore, I understand that I have the right to revoke my consent at any time by notification in writing to Molise Italian Studies.

I authorize release of my records to the individuals/parties identified above. I acknowledge by my signature that I understand that, although I am not required to release my records to these individuals, I am giving my consent to release the information. I understand that this release remains in effect until I revoke this permission in writing.

Signature (regarding the FERPA Release) _____

VIII. PHOTO & VIDEO RELEASE

Molise Italian Studies may use any photo and/or video recordings of Molise Italian Studies program participants while attending the program for promotional purposes on Molise Italian Studies websites, publications, promotional flyers, educational materials, derivative works, or for any other similar purpose. Molise Italian Studies may identify participants by name and/or title to accompany photos and/or video recordings.

Signature (regarding the Photo & Video Release) _____

IF YOU AGREE TO BE BOUND BY THE TERMS OF THIS AGREEMENT, PLEASE PRINT AND SIGN YOUR NAME BELOW.

I UNDERSTAND THAT BY SIGNING BELOW, I AGREE TO THE WAIVER AND RELEASE OF LIABILITY AND OTHER TERMS AND CONDITIONS, AS STATED ABOVE, AND THAT MY SIGNATURE MAKES THIS A LEGALLY BINDING CONTRACT.

Printed Name of Participant _____

Signature of Participant _____

Date _____

Please review this contract for errors before proceeding.