

This checklist is provided to help you ensure that all necessary documents and payments have been turned in to the Study Abroad Office and all campus offices are aware of your intent to study abroad. **It is your responsibility** to make sure all documents are submitted. Once you have completed this checklist,

please submit this form as well as the documents to the Study Abroad Office (Administration Bldg. 124).

**QUESTIONS?** See the Study Abroad Website : [www.acu.edu/studyabroad](http://www.acu.edu/studyabroad), call x2754 or email [study\\_abroad@acu.edu](mailto:study_abroad@acu.edu).

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## REQUIREMENTS FOR STUDY ABROAD:

- Completed **Application** form\*
- Completed **Emergency Notification Form**\*
- Signed **Behavior Contract**\*
- Signed **Release and Indemnification Agreement**\*
- Signed **Withdrawal/Ineligibility Policy**\*
- Two (2) **Faculty Reference** forms\*
- One (1) **Student Life Reference** form\*
- \$200 non-refundable application fee** (cash, credit card, or check payable to ACU Study Abroad)\*
- Travel Deviation Form** – This must be submitted at least 90 days prior to departure
- Photocopy of your passport** – This must be submitted at least 60 days prior to departure

\*Your application cannot be processed until all these items have been received by the Study Abroad Office.

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- I have contacted my financial aid officer to finalize my financial aid package.

NOTE: IF YOU ARE USING FINANCIAL AID, IT MUST BE FINALIZED BEFORE YOU ARE ALLOWED TO LEAVE FOR THE SEMESTER.

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I hereby authorize Study Abroad to charge my account for the program fee. I also understand my responsibility to pay the program fee as well as tuition. I agree that my ACU account will be charged for the amount of hours taken in the Study Abroad program. I understand that my application will not be processed until I have

paid the \$200 **non-refundable** application fee. I also understand that *I will not be approved* to study abroad until I have completed all necessary items on this document and obtained required signatures. I agree to the terms stated in the Withdrawal/Ineligibility Policy.

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STUDENT SIGNATURE

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DATE

OFFICE USE ONLY : Date received \_\_\_\_\_