

TO THE STUDENT APPLICANT:

THIS APPLICATION HAS FOUR PARTS:

- 1. PERSONAL INFORMATION**
- 2. PARTICIPATION AND HOLD HARMLESS AGREEMENT**
- 3. PROFESSOR'S RECOMMENDATION**
- 4. ASSESSMENT OF ACADEMIC MATURITY AND STABILITY**

IN ADDITION YOU MUST SUPPLY

- 1. AN ESSAY (APPROXIMATELY TWO PAGES) CONCERNING YOUR REASONS FOR APPLYING AND THE GOALS AND EXPECTATIONS YOU HAVE IN MIND. WE ENCOURAGE YOU TO WRITE IN SPANISH; BUT IF YOU CHOOSE TO WRITE IN ENGLISH THE LAST PARAGRAPH MUST BE A SUMMARY OF YOUR ESSAY *IN SPANISH*.**
- 2. A DEPOSIT OF \$300 IN CASH, CHECK, OR MONEY ORDER. *THIS DEPOSIT IS REFUNDABLE IF YOU ARE NOT SELECTED TO PARTICIPATE.***
- 3. AN OFFICIAL TRANSCRIPT.**

ALL PARTS OF THIS APPLICATION MUST BE SUBMITTED TO PROFESSOR LARRY JONES, ASSOCIATE DEAN OF STUDENTS, WALSH-ELLET 115, 735 UNIVERSITY AVENUE, SEWANEE TN 37383-1000; PHONE: 931 598 1177; FAX 931 598 1145

THE DEADLINE FOR SUBMISSION IS 5:00 TUESDAY, FEBRUARY 15, 2011. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

SEWANEE SUMMER IN SPAIN APPLICATION

PERSONAL INFORMATION

Name in full: _____
Last First Middle Prefer to be called

Social Security Number _____ Passport Number _____

Home Address: _____
Number and Street Telephone Number and Area Code

_____ City State Zip Code

College Address: _____
Number and Street Telephone Number and Area Code

Place of Birth: _____ Date of Birth: _____

Father's Name: _____ Living or Deceased (circle)

Address: _____

Mother's Name: _____ Living or Deceased (circle)

Address: _____

CONTACT IN CASE OF EMERGENCY: _____

ADDRESS: _____

Phone: _____ e-mail: _____

ACADEMIC INFORMATION

Institutions of collegiate rank attended: _____

Present Institution: _____

Area of academic concentration (major): _____

The group flight to Spain leaves the US on June 18. Please indicate the US city to which you would like to return and provide two possible dates for your return flight (no earlier than July 27):

City: _____ Date: 1. (preferred) _____ 2. _____

PARTICIPATION AND HOLD HARMLESS AGREEMENT

This Agreement is executed by _____ ("Participant"), and if Participant is of minority legal age (under 18), executed also by _____ ("Parent or Guardian") to The University of the South ("University").

The term "Undersigned" may be used in this Agreement as pertaining to more than one person. If Participant is of majority age, it refers only to Participant. If Participant is not of majority age, "Undersigned" refers to Participant and Participant's Parent or Guardian.

1. Participant's Desire to Participate in the Academic Program.

Participant is a student qualified for, accepted, and now attempting to complete enrollment in three courses, Introduction to Medieval Spain and the Road to Santiago; Spanish Art, Western Art, and the Road to Santiago; and PE 214, Pilgrimage to Santiago ("Academic Program") arranged by the University's Department of Spanish from June 8, 2011, through July 26, 2011, in Sewanee, Tennessee and Spain. It is expressly acknowledged that Participant is not required to participate in the Academic Program.

2. Waiver of University Liability for the Risks and Dangers.

The Undersigned understand that there are certain dangers, hazards, and risks inherent in international travel and the activities included in the Academic Program, including but not limited to serious or even mortal injuries and property damage. and that the University cannot and does not assume responsibility for any such personal injuries or property damage.

3. Participant Responsibility for Medical Needs.

The Undersigned assure the University of Participant having consulted with a medical doctor with regard to Participant's personal medical needs such that the Undersigned can and do further state that there are no health-related reasons or problems which preclude or restrict Participant's participation in this Academic Program.

The Undersigned are aware of all applicable personal medical needs, as well as having arranged for adequate insurance to meet any and all needs for payment of medical or hospital costs while undertaking this Academic Program. The Undersigned agree that the University cannot be and is not responsible for attending to any of Participant's medical or medication needs, that the Undersigned assume all risk and responsibility therefor, and that if Participant is required to be hospitalized or seek medical care while in a foreign country or in the United States during this Academic Program, the University cannot and does not assume any legal responsibility for payment of such costs.

4. Disclaimer of University Responsibility.

The Undersigned understand that the University in no way represents or acts as agent for the transportation carriers, hotels, and other suppliers of services connected with this Academic Program. The Undersigned further understand and agree that the University, its governing board, employees, and agents are:

Not responsible or liable for any injury, damage, loss, accident, delay or other irregularity which may be caused by the defect of any vehicle or the negligence or default of any company or person engaged in providing or performing any of the services involved in this Academic Program;

Not responsible for losses or expenses due to sickness, weather, strikes, hostilities, wars, natural disasters, or other such causes; and

Not responsible for any disruption of travel arrangements or any consequent additional expenses that may be incurred therefrom.

5. University's Rights and Powers.

The University reserves the following rights and powers:

The right to cancel without penalty the offering and conduct of the Academic Program; and

The right to withdraw any part of the field trip and to make any alterations, deletions or modifications in the itinerary and/or academic program as deemed necessary by the University or by the course instructors as agents of the University.

6. Potential Travel and Accommodation Problems.

The Undersigned acknowledge and agree to accept all responsibility for loss or additional expenses due to delays or other changes in the means of transportation, other services, or sickness, weather, strikes, or other unforeseen causes. The Undersigned acknowledge and understand that the University assumes no liability whatsoever for any loss, damage, destruction, theft or the like to Participant's luggage or personal belongings, and that Participant has retained adequate insurance or has sufficient funds to replace such belongings and will hold the University harmless therefrom.

The Undersigned acknowledge and understand that in the event Participant becomes detached from the field trip group, fails to meet a departure bus, airplane, or train, or becomes sick or injured, Participant will bear all responsibility to seek out, contact, and reach the field trip group at its next available destination; and that Participant shall bear all cost attendant to contact and reaching the field trip group at its next available destination.

All services and accommodations are subject to the laws of the country in which they are provided.

7. Legal Problems.

The undersigned acknowledges and understands that should Participant have or develop legal problems with any foreign nationals or government of the foreign country, Participant will attend to the matter personally with Participant's own personal funds. The University is not responsible for providing any assistance under such circumstances.

8. Acceptable Conduct by Participant.

The Undersigned are aware of the expected behavior of Participant while participating in this field trip. The Undersigned is aware that, as a guest in a foreign country, there is certain behavior that is unacceptable and could lead to possible disruption of Participant's participation in the Academic Program. The Undersigned assure the University that Participant shall act in an appropriate manner at all times. Such behavior shall include time when in the company of other Academic Program members and when Participant may be physically separated from Academic Program members.

9. Governing Law; Forum.

The Undersigned further agree that this Agreement shall be construed in accordance with the laws of the State of Tennessee which shall be the forum for any lawsuits filed under or incident to this Agreement or the Academic Program. The term and provisions of this Agreement shall be severable, such that if a court of competent jurisdiction holds any term to be illegal, unenforceable, or in conflict with any law governing this Agreement the validity of the remaining portions shall not be affected thereby.

10. Dismissal and Non-Reimbursement.

Should a student be compelled to withdraw for good reason before the beginning of the semester, the Summer in Spain program will undertake to determine what portion of the room, board and travel may be recoverable, bearing in mind that arrangements for travel abroad must be secured well in advance with full or substantial partial payment. After instruction has begun, a pro rata refund of board only is allowable. N.B. There will be no refund whatsoever should a student be suspended from the program by official disciplinary action.

11. Assumption of the Risks Involved.

Knowing the dangers, hazards, and risks of such activities, and in consideration of being permitted to participate in the Academic Program, the Undersigned, on behalf of Participant's family, heirs, and personal representative(s), agree to assume all the risks and responsibilities surrounding Participant's participation in the Academic Program, the transportation, and in any independent research or activities undertaken as an adjunct thereto, and in advance release, and forever discharge, release, waive, forever discharge, and covenant not to sue the University, its governing board, officers, agents, employees, and any students acting as employees ("Releasees"), from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature whatsoever which Participant may have or which may hereafter accrue to the Undersigned, arising out of or related to any loss, damage, or injury, including but not limited to suffering and death, that may be sustained by Participant or by any property belonging to Participant, whether caused by the negligence or carelessness of the "Releasees," or otherwise, while in, on, upon, or in transit to or from Spain or any location where the Academic Program or any adjunct to the Academic Program occurs or is being conducted.

The Undersigned understand and agree that "Releasees" do not have medical personnel available at the location of the Academic Program, during transportation, or anywhere in the Spain. The Undersigned understand and agree that "Releasees" are granted permission to authorize emergency medical treatment, if necessary, and that such action by "Releasees" shall be subject to the terms of this Agreement. The Undersigned understand and agree that "Releasees" assume no responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment.

It is the Undersigned's express intent that this release and hold harmless agreement shall bind the members of the Undersigned's family and spouse, if Participant is alive, and Participant's family, estate, heirs, administrators, personal representatives, or assigns, if Participant is deceased, and shall be deemed as a "Release," Waiver, Discharge, and Covenant not to sue the above-named "Releasees." The Undersigned agree to save and hold harmless, indemnify, and defend "Releasees" from any claim by the Undersigned or Participant's family, arising out of Participant's participation in the Academic Program.

In signing this Release, the Undersigned acknowledge and represent that the Undersigned have become fully informed of the content of this waiver of liability and hold harmless agreement by reading it before signing it, and by signing this document as the Undersigned's own free act and deed confirm that no oral representations, statements, or inducements, apart from the foregoing written statement, have been made.

The Undersigned execute this release for full, adequate, and complete consideration fully intending to be bound by the same,

The Undersigned state that Participant is / is not at least eighteen (18) years of age and fully competent to sign this Agreement.

THIS IS A RELEASE OF LEGAL RIGHTS. READ AND UNDERSTAND BEFORE SIGNING.

Signed _____ Date _____

Co-signature of parent or guardian if student is under 18 years of age.

Signed _____ Date _____

PROFESSOR'S RECOMMENDATION

Name of Applicant: _____

TO THE STUDENT:

Please sign the authorization below and give this recommendation form to a professor who knows you well and has taught you, preferably in your major. You must submit the completed recommendation, in a signed, sealed envelope, to the Associate Dean of students with the rest of your application.

I hereby authorize _____ to complete this form. Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this recommendation and understand that the information provided will be used only for the purpose for which it was prepared.

Student's signature *Date*

TO THE PROFESSOR:

The student named above has applied to Sewanee Summer in Spain. Please give your confidential assessment of his/her qualifications and suitability for such a program. Complete the form and return it to Dean of the College, The University of the South, 735 University Avenue, Sewanee, Tennessee 37383-1000.

1. How long have you known this applicant? _____

2. In what capacity? _____

3. In terms of intellectual qualities and capabilities, how would you rate this applicant compared with other students you are teaching?

- In the top 5% o
- In the top 10% o
- In the top 20% o
- In the top 25% o
- Other o

4. Is applicant capable of following a lecture in basic Spanish? _____

5. Is applicant able to express basic needs and ideas in Spanish? _____

Professor's Recommendation, cont'd

6. Please report any particular strengths and weaknesses, or any aspect of the applicant's character or personality, that might affect his/her success on an international study program.

This student is _____ recommended without reservation _____ recommended with reservation
_____ not recommended.

Signature: _____ Date: _____

Please print name and position: _____

SEWANEE SUMMER IN SPAIN

ASSESSMENT OF ACADEMIC MATURITY AND STABILITY

TO THE STUDENT: Please sign the authorization below. If you are a Sewanee student, submit it to the Associate Dean of Students with the rest of your application. If you are applying from another college or university, please have it completed by the person at your institution who is responsible for approving your participation in the Sewanee Summer in Spain program; then submit it with the remainder of your application.

I hereby authorize the completion of this form by the appropriate official. I understand that the information provided will be used only for the purpose for which it was intended.

Student's signature

TO THE DIRECTOR OF STUDY ABROAD/DEAN

The student named above has applied to Sewanee Summer in Spain, a study abroad program sponsored by the University of the South. Please complete this form and return it to Dean of the College, The University of the South, 735 University Avenue, Sewanee, Tennessee 37383-1000.

Is the student a full-time undergraduate at your college/university?

Is the student in good academic and social standing? _____

Is the student, or has the student ever been on academic probation? _____

Has the student been involved in a disciplinary problem while enrolled at your institution? _____

If yes, please explain: _____

Does the student have your approval to study abroad? _____

If conditional, please explain: _____

Official's name: _____ Title: _____

Signature: _____ Date: _____

College or University: _____