

Application for Travel Study

Spain 2009 Summer Spanish M.A. Program



SACRAMENTO STATE
COLLEGE OF CONTINUING EDUCATION

Deposit required to reserve a space in the program: \$1000, payable to Sacramento State, should accompany each participant's application. (see reverse for more information)

PARTICIPANT INFORMATION

(Please print clearly in black or blue ink)

Name (Last, First, Middle Initial) _____ Date _____

Social Security Number or Student ID number* _____ Birth Date _____

Home Address (Number, Street, Apt.) _____ City _____ State _____ Zip _____

Home Phone _____ Work/Cell Phone _____

Email _____ Fax _____

Company Name _____ Job Title _____

Company Address (Number, Street, Suite) _____ City _____ State _____ Zip _____

In an emergency, please contact: _____

Name _____ Telephone _____ Relation _____

Address _____ City _____ State _____ Zip _____

Medications required while traveling: _____

TRAVEL INFORMATION

Location of Study Program _____ Dates _____

I would like to depart from: _____

Main airport/Departure City

TRAVEL DOCUMENTATION

Information to be provided when available.

Passport No. _____ Name on Document _____

City of Issue _____ Date of Issue _____ Expiration Date _____ Country _____

PAYMENT INFORMATION

Send checks or money orders (payable to Sacramento State) to Travel Study Programs, College of Continuing Education at Sacramento State, 3000 State University Drive East, Sacramento, CA 95819-6103. You may also pay with Visa, MasterCard, or Discover by contacting the program representative at **(916) 278-4554**.

* Social Security Number required if student desires federal educational tax credit

Are you a native speaker of Spanish? yes no (not required)

Are you a native speaker of another language? Please List:

See next page for more information

SACRAMENTO STATE RESPONSIBILITY AND LIMITATION OF LIABILITY SPECIFIED

Sacramento State is responsible for providing instruction and appropriate academic credit. The University reserves the right to make changes or substitutions in the dates, itinerary, speakers/lectures, or costs as it becomes necessary or desirable without liability to itself or to its cosponsoring or affiliated associations and organizations or their agents.

Payment Deadlines:

February 15, 2009: Application + \$1,000 Deposit (Make checks payable to Sacramento State)

March 1, 2009: \$1,000 second payment

May 1, 2009: Final Payment of \$3,350 (for a total of \$5,350)

Refund Deadlines:

Cancellation up to May 1, 2009: All but \$150 of amount received will be refunded.

Cancellation between May 2 - June 1, 2009: All but \$500 of amount received will be refunded.

Cancellation after June 1, 2009: No refund (unless an approved replacement for the participant can be found).

There will be no refunds for unused portions of the program. Prices are subject to change.

Personal Conduct: Participants will be held to the same level of conduct stipulated in the Sacramento State conduct code. At the Director's discretion, participants who are disruptive or dangerous to the group will be asked to leave at their own expense.

1. I agree to obtain any immunization shots required at my own expense.
2. I certify that I will take adequate personal funds with me to cover personal expenditures not covered by the package price. (Not less than \$500.)
3. I agree to abide by the decisions of the Program Director and staff while in the country of study. I agree to abide by the laws and regulations of the countries visited.
4. I certify that I will complete all University forms covering my participation in the program on or before one month of the date of travel.
5. If under the age of 18, I will obtain parent's or guardian's approval for program participation.
6. I acknowledge that enrollment in the Spain 2009 Summer Spanish M.A. Travel Study Program will not automatically enroll me in Sacramento State. This is not an application for admission to Sacramento State.
7. I understand that I am responsible for my Tourist Card/passport and that, if lost or stolen, it will require an additional set of photographs and other identification with my signature and photo.
8. I understand that airport/airline fees are not included in the program price.

Applicant Signature

Date