Thank you for your interest in the Wenzhou-Kean University Study Abroad Program. Students from Wenzhou-Kean will have the opportunity to study in Kean USA for one semester or one academic year. Qualified applicants are encouraged to apply to broaden their academic experience.

**Upcoming Semester dates:**
Spring 2019: January 22, 2019 to May 15, 2019
Fall 2019: September 3, 2019 to December 20, 2019

**Eligibility:**
1) Be in good academic standing in the university with a clear record of academic integrity and student conduct.
2) Have at least a 2.5 cumulative GPA.
3) Have successfully passed all of their ESL and English courses.
4) Have approval from the student’s WKU academic adviser

**Application check list:**
- Wenzhou-Kean Study Abroad Application Packet
  - Study Abroad Application Form
  - Personal Statement
  - Emergency Contact Form
  - Statement of Authorization and Consent Form
  - Expectations of Wenzhou-Kean University Study Abroad Program Form
  - Conduct Clearance Form
  - Recommendation Letter written by a WKU faculty member in the student’s major
- Copy of unofficial Wenzhou-Kean transcript

**Application Deadline:** October 26, 2018
Acceptance notifications will be sent by November 14, 2018
**Upon Acceptance into the Wenzhou-Kean Study Abroad program, details and application will be given to apply for F1 student visa.**

*A medical examination form must be completed prior to your arrival in the US.*

**Other Requirements:**
- Required to attend a mandatory International Student Orientation
- Register for one credit course of GE3000, a transition seminar for WKU students
STUDY ABROAD APPLICATION FORM

PERSONAL INFORMATION

Name: ___________________________, ___________________________  ____________________
   (Family Name)                        (Given Name)        (Middle Name)

Preferred Name: _______________________

I am a:   Sophomore – Junior – Senior (circle one)

Major: ______________________________     Minor: ___________________________

Current Home Address (Not school address): _____________________________________

Permanent Address (if different from above): _____________________________________

Telephone: (____) ______________   Email: _______________________________________

Kean ID Number: ________________________     Gender: ___________________________

Date of Birth (mm/dd/yyyy): ____________________   Passport # (if known): ___________________________

Place of Birth: __________________________ Country of Citizenship: ______________________________

ACADEMIC RECORDS

Please select the semester or semesters you wish to study at KUSA.

Spring 2019 _________         Summer 2019 _________       Fall 2019 ___________

Grade Point Average in Major: _________   Total Completed Credits (not in progress): _____________

Cumulative GPA: __________
Please write a personal statement that touches on career goals, hobbies and special interests, campus activities, and work experience. Remember to use detail and include how studying at KUSA will help you in the future.
Emergency Contact Form

On rare occasion, an emergency requiring hospitalization and/or surgery may develop. This form is a safeguard to prevent dangerous delay in case of emergency. Please print or type information requested.

This information is for: __________________________  __________________________
Family Name       Given Name

1) Emergency Contact:
Name ___________________, ___________________       Relationship: ______________________
Family Name                 Given Name

Home Address: _____________________________________________

Home Phone: (______) ___________________ Cell Phone: (_____) ______________________

Email Address: ___________________________________________________

2) Current health and medical coverage for the duration of the student’s study abroad:

Insurance Carrier: _________________________________________________________

Policy Number: _____________________________ Expiration Date: _________________

*If health insurance is not available, students will be able to purchase policy at Kean USA.

3) Medicines I am allergic to:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

4) Any medical conditions in which a physician in another country should be made aware of:
___________________________________________________________________________

5) In the event of an emergency and we cannot be reached, we give our consent to authorize treatment or hospital care that is in the best judgment of the licensed physician.

Student signature: ___________________________________________        Date: __________

Printed Name: __________________________________________________
Statement of Authorization and Consent Form

The following agreement is designed to protect all participants in the Wenzhou-Kean University Study Abroad Program: students, faculty, and staff of Wenzhou-Kean University, and Kean USA. Please indicate permission/agreement with the following conditions by affixing your signatures below.

I understand that any program of travel does involve some degree of risk and that participation in the program is entirely voluntary. I release Wenzhou-Kean University, its trustees, officers, and employees from any responsibility from any claims, lawsuits, damages, expenses, liabilities, or injuries which may occur or be given rise during participation in the Study Abroad Program.

I understand that it is the responsibility of the student to have adequate medical, health, travel, and liability insurance coverage for the duration of the overseas experience. I have verified coverage with our insurance carrier(s) and it is valid overseas. I will provide documentation of required Kean USA insurance needed or will purchase the necessary policy.

I agree that if I, the participating student, drives or operates any vehicle (i.e., car, bicycle) while abroad, I as the student take full responsibility for all claims damages, liability, lawsuits, or injuries occurring as a result of this action.

I understand that while traveling or residing in a foreign country, I will be subject to laws, rules, and law enforcement procedures of that country. Any violation of such laws is beyond the control of the Wenzhou-Kean University Study Abroad Program.

I understand that if I leave the program once the overseas program has begun or the institution and associated fees have been paid, there will be no refund.

I understand the study abroad experience exists to ensure overseas opportunities to the student body present and future that outstanding balances limit the future opportunities for all Wenzhou-Kean University students.

Student Signature: _______________________________________

Printed Name: ___________________________________________

Date: ____________________________
EXPECTATIONS OF WENZHOU-KEAN UNIVERSITY STUDY ABROAD PROGRAM

I agree to abide by the following guidelines while spending a semester abroad as a Wenzhou-Kean University student:

- I will abide by the rules, regulations, and policies of the host institution (Kean USA).
- I will become familiar with and abide by the laws of my host country or other countries I visit.
- I will correspond with Coordinator of the Study Abroad Program regularly while overseas.
- My personal conduct will be a credit to my country, Wenzhou-Kean University, my family and myself.
- I will respect the cultural and ethnic differences of my host institution and of individuals I meet.
- I will place primary priority on my academic responsibilities while studying overseas.
- I agree to stay for the full term of my host institution and not leave before classes are completed.
- I will complete all papers, take all required examinations, read all texts, and attend all classes as prescribed by my host institution.
- If housing is provided by a host family or individual, I agree to abide by the policies and standards governing that household.
- I will remain in full-time status as defined by Wenzhou-Kean University for my program while overseas.
- I understand it is my responsibility to prepare all paperwork to obtain passports, visas, and identification cards.
- I will abide by the rules, regulations, and policies required to maintain my international student status.

I understand participation in the Wenzhou-Kean University Study Abroad Program carries with it standards, requirements, and policies of the host institution, to respect the opinions and interests of all people involved in this endeavor, and in general, to conduct myself in a manner bringing honor to myself and to Wenzhou-Kean University.

I certify that I have not, to the best of my knowledge, misrepresented any information supplied in this application.

Student Signature: _______________________________________ Date: ______________

Printed Name: ______________________________________________________________________
Student Conduct Records Release Form

Please complete the top half of the document and submit it to the CIS offices. CIS will deliver it to The Office of Student Conduct on your behalf.

I recognize that my student conduct (disciplinary) history as a Wenzhou-Kean University student may affect my status as a study abroad participant. With this knowledge, I hereby request that The Office of Student Conduct perform a student conduct check, and that records be sent to The International Office.

Student Signature

__________________________________________________________________________

Printed Name

__________________________________________________________________________

Date

__________________________________________________________________________

Student Kean ID number

__________________________________________________________________________

**Student Conduct Officer, please indicate below any disciplinary infractions for the aforementioned student.**

__________________________________________________________________________

__________________________________________________________________________

Student Conduct Officer printed name

__________________________________________________________________________

Student Conduct Officer signature

__________________________________________________________________________

Date

__________________________________________________________________________
Recommendation Letter

To be completed by a faculty member in the student’s major.

Student’s Name: ______________________________________

The student named above has applied for participation in the Wenzhou-Kean University Study Abroad Program. A semester living in an unfamiliar environment can be a demanding experience, requiring organizational skills, self-reliance, and motivation beyond levels expected “at home.” Your help in candidly appraising the applicant’s strengths and limitation in this regard is greatly appreciated. **Evaluations should include specific detail. We are looking for an accurate and detailed depiction of the student. Please include specific examples.** Please feel free to attach an additional page as necessary.

1. How long and in what capacity have you known the applicant? (If you were the student’s professor please include which course(s) you taught the student.)

2. Do you support the student’s wishes to study abroad at Kean USA? Please give any examples of interactions and/or experiences that support your answer—examples: reliability, academic interest and motivation, ability to relate well to others, emotional stability, integrity, self-confidence, etc.

_____________________________________  ___________________________________
Signature                                               Printed Name

Title: __________________________________               Department: ____________________________

Email: __________________________________            Date: __________________