

UNIVERSITY OF SOUTHERN MAINE
OFFICE OF INTERNATIONAL PROGRAMS
Bringing The World To Mind

NATIONAL STUDENT EXCHANGE APPLICATION

Name _____ Student ID # _____

Local Address _____ Phone _____

Permanent Address _____ Phone _____

E-Mail Address _____ Current Major _____

Cumulative G.P.A. _____ Are You A US Citizen? ____ Yes ____ No

Are You Planning To Live On-Campus ____ Yes ____ No

Courses Remaining in Major

List the required courses remaining in applicant's major after current semester.

_____	_____
_____	_____
_____	_____

Department Faculty Advisor Signature

Date

Courses Remaining in Core Curriculum

This entry should be made in consultation with the appropriate Dean's Office representative. List Core Curriculum courses remaining after the current semester.

_____	_____
_____	_____
_____	_____

Dean's Office Signature

Date

Please list the institutions which you would be interested in attending (**in order of preference**). Please list more than one. Indicate the length of exchange.

Payment Plan: Home
Or Host

- 1. _____ Fall ____ Spring ____ 200 ____ _____
- 2. _____ Fall ____ Spring ____ 200 ____ _____
- 3. _____ Fall ____ Spring ____ 200 ____ _____
- 4. _____ Fall ____ Spring ____ 200 ____ _____

Deadlines: February 13th for primary placement in National Student Exchange and for Fall, Summer or Academic Year on-going for Fall until April 15th and on-going for Spring with final deadline set at September 25th.

I understand and agree that I am to return to my HOME campus to share my experiences with others upon completion of the exchange, and that I will not apply to transfer to the HOST campus.

RELEASE OF INFORMATION

The collection, retention, and dissemination of your records and information about you are subject to federal regulation under the Family Education Rights and Privacy Act of 1974. You are responsible for specifying the persons or agents who have access to your records. Therefore, it is necessary that we obtain your permission to request and release information pertinent to your exchange. Please read the following statements and sign below:

I understand that it will be necessary for my campus to obtain certain information about my academic and non-academic record in order to: 1) ascertain my eligibility and suitability for an exchange through NSE, and 2) facilitate my exchange after it is arranged. I hereby grant permission to the NSE coordinator and/or designee to obtain information that is appropriate to my application and participation in the exchange including, but not limited to, letters of recommendation, permanent academic records and transcripts, conduct and disciplinary file housed with the USM Office of Community Standards, fiscal records, medical records, all for the purposes of exchange placement and participation, continuation, or termination.

I hereby release information contained in my application, letters of recommendation, transcripts, and other information required as part of the NSE application process to my home NSE Coordinator, designee, and those individuals/committees responsible for reviewing and approving my application for exchange participation.

I hereby release information contained in my application, letters of recommendation, transcripts, and other information required as part of the NSE application process to the National Student Exchange Central Office and to the NSE host institution at which I am placed.

Signature _____ Date _____

I have read and fully understand:

- information on eligibility, policy, and procedures presented in the NSE Directory (pages 6-12)
- campus policies and procedures governing my exchange participation

I further understand that:

- participating in the National Student Exchange is a privilege and not a right
- submitting an application is not a guarantee of application acceptance or placement
- failure to maintain (prior to and during my exchange) all of the eligibility requirements of the program and those of my home and host campuses will result in the cancellation of my exchange.
- failure to pay all financial obligations to my home and host campuses will result in the cancellation of my exchange.

I also understand that until financial obligations are met, my home and host campuses will not release transcripts; and I will not be permitted to re-enroll at, or graduate from, my home campus.

If accepted for participation in the National Student Exchange, I agree to adhere to all the rules and regulations of both my home and host institutions. Failure to do so will result in the cancellation of my exchange.

I affirm that all information is complete, accurate, and true to the best of my knowledge. I acknowledge that I am signing freely, voluntarily, and under no compulsion.

Signature _____ Date: _____