



# ACADEMIC STUDIES ABROAD GUIDELINES & REIMBURSEMENT POLICIES

## LAWS

STUDENTS MUST OBEY ALL U.S. AND STATE LAWS REGARDING THE POSSESSION, USE, TRANSFER, OR CONSUMPTION OF DRUGS, AS WELL AS ANY OTHER ILLEGAL BEHAVIOR. I WILL NOT BE INVOLVED IN ANY ILLEGAL ACTIVITY DURING MY STUDIES ABROAD, INCLUDING THE POSSESSION, USE, TRANSFER, OR CONSUMPTION OF ILLEGAL DRUGS. I UNDERSTAND THAT IF I DO BECOME INVOLVED IN ANY SUCH ACTIVITY, IT COULD RESULT IN IMMEDIATE EXPULSION FROM THE PROGRAM. I UNDERSTAND THAT AS A PARTICIPANT IN THE ASA PROGRAM, I SHALL BE SUBJECT TO RULES AND REQUIREMENTS OF MY HOST UNIVERSITY AND OF COOPERATING UNIVERSITIES OR AGENCIES IN THE U.S. AND ABROAD. I AGREE TO FULFILL THESE RULES AND REQUIREMENTS IN ALL RESPECTS, AND I UNDERSTAND THAT I SHALL BE SUBJECT TO IMMEDIATE DISMISSAL FROM THE PROGRAM IF I DO NOT ABIDE BY THESE RULES. I ASSUME RESPONSIBILITY FOR MY OWN WELFARE WHILE ABROAD.

INITIALS \_\_\_\_\_

## FINANCIAL RESPONSIBILITY

I AGREE TO ASSUME ALL FINANCIAL RESPONSIBILITY FOR THE PROGRAM. IF I DO NOT PAY BY THE PROGRAM DEADLINE, OR BY THE DEADLINE AGREED UPON WITH THE ASA OFFICE AFTER ASSESSING A LATE FEE, I UNDERSTAND THAT I AM SUBJECT TO A 2% MONTHLY SURCHARGE UNTIL I AM PAID IN FULL. I UNDERSTAND THAT IF I AM ON FINANCIAL AID I WILL BE SUBJECT TO A 2% MONTHLY SURCHARGE IF I AM NOT PAID IN FULL 10 DAYS AFTER RECEIVING MY FINANCIAL AID DISBURSEMENT FROM MY HOME UNIVERSITY.

INITIALS \_\_\_\_\_

## ASSAULT

IF ANY ASA STUDENT SHOULD BECOME THE VICTIM OF AN ASSAULT WHILE ON THE PROGRAM, HE/SHE SHOULD IMMEDIATELY CONTACT A REGENT'S COLLEGE REPRESENTATIVE. IN ADDITION, THEY ARE REQUIRED TO CONTACT THE ASA OFFICE IN THE U.S. AT 617-437-9388.

INITIALS \_\_\_\_\_

## RIGHTS AND PRIVACY ACT

**THE FAMILY EDUCATION RIGHTS AND PRIVACY ACT OF 1974**, AS AMENDED, IS A FEDERAL LAW WHICH PROHIBITS INSTITUTIONS FROM RELEASING STUDENT DATA TO ANYONE WITHOUT EXPRESSED WRITTEN PERMISSION FROM THE STUDENT. IF A SITUATION OCCURS WHERE ASA FEELS THE STUDENTS' WELL-BEING IS IN QUESTION, ASA WOULD LIKE PERMISSION TO CONTACT A PARENT OR GUARDIAN. BY INITIALIZING THE STATEMENT, I WAIVE MY RIGHT TO **THE FAMILY EDUCATION RIGHTS AND PRIVACY ACT OF 1974** AND GIVE ASA PERMISSION TO DISCLOSE INFORMATION ABOUT ME TO MY PARENT OR GUARDIAN, AS ASA BELIEVES APPROPRIATE.

INITIALS \_\_\_\_\_

## HOUSING

STUDENTS MAY LEAVE THEIR PROGRAM HOUSING WITHOUT PENALTY AT ANY POINT DURING THE SEMESTER, BUT WILL NOT BE REIMBURSED FOR THE HOUSING PORTION OF THE PROGRAM FEE. STUDENT WILL NOT RECEIVE ANY REIMBURSEMENT FOR HOUSING IF THEY LEAVE THE PROGRAM EARLY, ARE DISMISSED FROM PROGRAM HOUSING OR FROM THE ASA PROGRAM, OR IF THEY CHOOSE TO MOVE INTO ALTERNATE HOUSING DURING THE PROGRAM. STUDENTS ARE RESPONSIBLE FOR ALL COSTS INCURRED RESULTING FROM DAMAGE TO THEIR RESIDENCE.

INITIALS \_\_\_\_\_

## EXCURSIONS

STUDENTS WILL NOT RECEIVE ANY REIMBURSEMENTS FOR EXCURSIONS THAT THEY DO NOT PARTICIPATE IN NOR CAN THEY REPLACE A MISSED EXCURSION WITH AN OPTIONAL ONE. IF THEY WISH TO GO ON ANY OPTIONAL EXCURSIONS, EXTRA PAYMENT IS NECESSARY.

INITIALS \_\_\_\_\_

## ASSUMPTION OF THE RISK, RELEASE AND INDEMNIFICATION

THE PARTICIPANT AND UNDERSIGNED UNDERSTAND THAT THERE ARE CERTAIN DANGERS, HAZARDS, AND RISKS INVOLVED IN INTERNATIONAL TRAVEL AND IN THE ACTIVITIES INCLUDED IN THE ACADEMIC PROGRAM, THAT COULD INCLUDE SERIOUS OR EVEN MORTAL INJURIES AND PROPERTY DAMAGE. WITH KNOWLEDGE OF THESE DANGERS, HAZARDS, AND RISKS OF SUCH ACTIVITIES, AND IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE ACADEMIC PROGRAM AND ALL ASSOCIATED ACTIVITIES, INCLUDING BUT NOT LIMITED TO, THOSE DESCRIBED ABOVE, PARTICIPANT, THE UNDERSIGNED, ON BEHALF OF PARTICIPANT, PARTICIPANT'S FAMILY, SPOUSE, ESTATE, HEIRS, EXECUTORS, ADMINISTRATORS AND PERSONAL REPRESENTATIVE(S), AGREE TO ASSUME ALL THE RISKS AND RESPONSIBILITIES ARISING OUT OF PARTICIPANT'S PARTICIPATION IN THE ACADEMIC PROGRAM, THE TRANSPORTATION TO AND FROM THE FOREIGN COUNTRY, AND IN ANY INDEPENDENT RESEARCH OR ACTIVITIES UNDERTAKEN AS AN ADJUNCT THERETO. PARTICIPANT AND THE UNDERSIGNED RELEASE AND HOLD HARMLESS ASA, ITS GOVERNING BOARD, OFFICERS, EMPLOYEES, AGENTS, AND INTERNS ("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 PARTICIPANT OR UNDERSIGNED, THAT MAY BE SUSTAINED BY PARTICIPANT, THE UNDERSIGNED OR BY ANY PROPERTY BELONGING TO PARTICIPANT, EVEN IF CAUSED BY ANY NEGLIGENCE OR CARELESSNESS OF THE RELEASEES (A) WHILE PARTICIPANT IS IN, OR IN TRANSIT TO OR FROM THE FOREIGN COUNTRY WHERE THE ACADEMIC PROGRAM OR ANY ADJUNCT TO THE ACADEMIC PROGRAM OCCURS OR IS BEING CONDUCTED; (B) DURING ANY INDEPENDENT TRAVEL OR ACTIVITIES UNDERTAKEN BY THE PARTICIPANT; AND (C) ARISING OUT OF OR RELATING TO PARTICIPANT'S PARTICIPATION IN THE ACADEMIC PROGRAM.

INITIALS \_\_\_\_\_

**BY SIGNING BELOW I CERTIFY THAT I HAVE CAREFULLY READ AND FULLY UNDERSTAND THE ABOVE PROVISIONS, AND AGREE TO ABIDE BY THEM.**

STUDENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_