

# CONTACT INFORMATION

**Attach  
passport size  
photo**

**Student:** \_\_\_\_\_ **Class of: 200** \_\_\_\_\_ **ID#:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Foreign Institution:** \_\_\_\_\_

**Please supply the following additional information**

**Emergency Contacts: (Parental or Legal Guardians)**

1. Name: \_\_\_\_\_, Relationship: \_\_\_\_\_, Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_, Relationship: \_\_\_\_\_, Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**Please answer all of the questions below. If you answer "NO", please provide an explanatory statement on a separate, attached page, with your signature and date. Please Circle "YES" or "NO"**

I understand that I am responsible for making arrangements to have an official transcript of my grades sent to Stonehill. **YES NO**

In addition to the courses I will take abroad, I will have taken at least 20 courses at Stonehill College, prior to graduation. **YES NO**

I understand that I am solely responsible for my health insurance coverage, as well as for departure and return flights and all travel, while I am abroad. **YES NO**

I understand that I am solely responsible for the satisfactory completion of all Major, Minor, and General Studies requirements, as well as other graduation requirements. **YES NO**

**Answer ONLY if you are a resident student:**

I have formally notified the Residence Life Office of my plans to study abroad. **YES NO**

**Answer ONLY if applicable:**

I have made the necessary provisions for continuing my prescribed medication(s) during my time abroad. **YES NO**

I certify that I have read the statement in the College Catalog regarding Stonehill College's Study Abroad Program and accept those conditions, and I attest to the accuracy of the statements made on this application form.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

**Please submit this completed and signed form to:  
INTERNATIONAL PROGRAMS OFFICE  
Kruse Center for Academic & Professional Excellence  
Cushing-Martin Hall**