

**Oregon International Education Consortium
London Program, Spring Quarter 2012
March 22 – June 1**



Application Procedure

1. Complete the AIFS application form, securing the signature of your college's study abroad program coordinator and thus certifying your eligibility to apply. You must be at least 18 years old by March 22, 2012, to apply.
2. A deposit of \$450 is due with the application (includes a \$50 non-refundable application fee).
3. Attach a photocopy of the information page of your passport (the page with your picture). If you do not yet have a passport, please apply for one immediately, and mail a copy once you have received it.
4. Return the completed application form and payment to: American Institute For Foreign Study, Partnership Programs, College Division, River Plaza, 9 West Broad Street, Stamford, CT 06902.
5. The balance of fees should be sent before the deadline directly to: American Institute For Foreign Study, Partnership Programs, College Division, River Plaza, 9 West Broad Street, Stamford, CT 06902. Telephone (800) 727-2437.

The AIFS program fees include the following (based on an enrollment of 15-19 participants):

Option A: Shared Homestay: \$6,525.00

Option B: Shared Apartment: \$7,445.00

- ⇒ Option A - accommodations in a twin-bedded room in a home in London including breakfast five days a week and access to cooking facilities
- ⇒ Option B - shared accommodations in an apartment – no meals are included

Both options include:

- ⇒ London Transport travel pass giving unlimited use of the buses and underground trains. Homestay participants receive a multi-zone (typically zones 1-3) travel card, and apartment participants receive a central zone (zones 1 & 2) travel card;
- ⇒ orientation program consisting of an orientation meeting with AIFS staff; student information packet including comprehensive student handbook, local area information, a welcome reception and a half-day guided sightseeing tour of London by private coach;
- ⇒ cultural program of activities including two full day trips (to Oxford, with a visit to the Pitt Rivers Museum, and Stonehenge/Salisbury), three theater performances, a football match and a walking tour;
- ⇒ special membership of the University of London Union giving access to Union clubs and societies, low-cost student cafeterias and, at an additional cost, sports facilities;
- ⇒ membership with borrowing rights of the local public libraries;
- ⇒ computer lab at the wireless-enabled AIFS Student Center with free access to e-mail and Internet facilities;
- ⇒ access to the AIFS Student Center and Student Services staff of experienced advisors for information, personal advising/counseling and 24-hour emergency contact service;
- ⇒ medical and program fee refund insurance policies;
- ⇒ \$50 non-refundable application fee.

Program fees do not include the following:

- ⇒ round-trip airfare (Portland – London – Portland) including round-trip airport transfers overseas between the airport and the student housing in London on the regular program dates for \$595*;
- ⇒ mandatory additional U.S. government and airline-imposed departure taxes, fees and fuel surcharges of \$578 (subject to change);
- ⇒ \$250 refundable damage deposit;
- ⇒ optional four-day/three-night weekend excursion to Scotland for \$495;
- ⇒ optional meal plan consisting of 17 meals for a supplemental fee of \$350;
- ⇒ tuition fees to your college;
- ⇒ textbooks;
- ⇒ passport and visa fees if applicable;
- ⇒ field trips or excursions required by your instructors;
- ⇒ local or independent travel while in London;
- ⇒ personal expenses such as laundry;
- ⇒ optional personal effects coverage and medical insurance upgrade.

***AIFS offers round-trip flights between Portland and London including round-trip transfers between the overseas airport and your program site, at a cost of \$595, excluding mandatory additional U.S. government and airline-imposed departure taxes, fees and fuel surcharges of \$578 (subject to change) for which you will be billed separately. Please mark your application form if you wish to purchase the flight, and you will be billed accordingly. A minimum of 10 participants must take the AIFS flight for it to be offered.**

Please retain this page for your records.

PAYMENT SCHEDULE FOR AIFS FEES

Option A – Shared Homestay

<u>Spring Term</u>	<u>Fee</u>	<u>Due Date</u>
Enrollment deposit	\$450.00	December 7, 2011
Balance of fees	<u>\$6,075.00</u>	February 1, 2012
Sub-total	\$6,525.00	
Damage Deposit (Mandatory/ Refundable)	\$250.00	February 1, 2012
Total	<u>\$6,775.00</u>	

Option B – Shared Apartment

<u>Spring Term</u>	<u>Fee</u>	<u>Due Date</u>
Enrollment deposit	\$450.00	December 7, 2011
Balance of fees	<u>\$6,995.00</u>	February 1, 2012
Sub-total	\$7,445.00	
Damage Deposit (Mandatory/ Refundable)	\$250.00	February 1, 2012
Total	<u>\$7,695.00</u>	

Optional

Airfare	\$595.00	February 1, 2012	Meal Vouchers	\$350.00	February 1, 2012
Taxes/Fees*	\$578.00	February 1, 2012	Medical Insurance Upgrade	\$65.00	February 1, 2012
Scotland tour deposit	\$50.00	December 7, 2011	Personal Effects Coverage	\$90.00	February 1, 2012
Balance of Scotland tour	\$445.00	February 1, 2012			

*Airline taxes/fees/fuel surcharges subject to change.

Checks should be made payable to "AIFS." You may also use American Express, MasterCard or Visa. See application form. All students must submit the \$450 deposit with the completed application. Financial Aid students are responsible for paying, by February 1, 2012, the airfare (\$595), taxes/fees/fuel surcharges (\$578 [subject to change]), \$250 refundable damage deposit, \$50 tour deposit (if applicable), a \$600 program reservation deposit, and any remaining balance that will not be covered by aid.

Please note: A \$35 returned check fee will be charged on all checks returned by the bank for insufficient funds.

AIFS TRANSPORTATION PACKAGE

Participants have the option of purchasing a round-trip ticket for the flight arranged through AIFS. Participants choosing this option should note the following restrictions: Tickets purchased from AIFS are exclusively on scheduled airlines (not charters). They are not endorsable to another carrier. Flights are not necessarily direct or non-stop, and frequent flyer miles are not applicable. The AIFS Transportation Package includes round-trip ground transportation from the airport in London to your accommodations on the regularly scheduled program dates. AIFS will book flights on the dates indicated on this application only.

Participants wishing to purchase the Transportation Package must notify AIFS in writing by Wednesday, December 7, 2011. Participants wishing to cancel from the flight must notify AIFS in writing by Wednesday, February 1, 2012. Cancellation penalties will apply. Tickets are non-refundable after this date.

AIFS Airfare Regulations: Return must be to original U.S. departure point. Tickets are subject to airline availability. No refunds are available for any unused portion of ticket. Tickets cannot be rerouted, and stopovers are not permitted. Once in London participants may be able to change their return date, but only if that date is available and in the same class of service in which the ticket was booked. Only the ticketing agent can provide this information. Participants are subject to agency and airline-imposed change fees and space availability. Group round-trip ground transportation to and from the airport in London is on the regularly scheduled program dates only.

AIFS cannot guarantee that all passengers will be booked on the same flight.

AIFS will not make your flight arrangements for you unless you clearly indicate your travel preferences on your application. A minimum of 10 participants must take the AIFS flight for it to be offered.

PROGRAM DATES

Spring Quarter, 2012

Thursday, March 22	AIFS flight departs U.S. for London, England.
Friday, March 23	Arrive in London. Transfer to your accommodations.
Friday, April 6	
to	Easter holiday.
Monday, April 9	
Thursday, April 19	
to	Optional weekend trip to Scotland.
Sunday, April 22	
Monday, May 7	May Day bank holiday.
Friday, June 1	End of program. AIFS flight departs for the U.S.

PART E – HEALTH AND HOUSING INFORMATION

Please complete the following questionnaire carefully. Your housing assignment will be made based on the information that you provide. All requests are taken into consideration. **There will be a \$50 change fee imposed on each change in housing options. Payment is due at the time the request is made.**

Name _____ School _____ Term _____

Please complete one section only, either the Shared Homestay OR Shared Apartment option.

SHARED HOMESTAY

Please complete the following questions to assist the London staff in finding a suitable host family for you.

Father's name _____ Occupation _____

Mother's name _____ Occupation _____

Ages of brothers and sisters _____

Major _____ Year _____

Jobs done in the past _____

Do you smoke? Yes No Do you object to a roommate who smokes? Yes No

Would members of the host family who smoke elsewhere in the house/apartment bother you? Yes No

Roommate preference (if known) (1) _____ (2) _____

Would you prefer to live in a household with children or without? With Without

Would you object to being placed with a single-person host? Yes No

Do you have any allergies to household pets? Yes No

If there are any more details about yourself that you think would help your host to get to know you better, please state below:

SHARED APARTMENT

Please note that specific housing preferences cannot be guaranteed.

Please note that single rooms are very limited and are allocated according to special needs, e.g. medical, age-related

Do you smoke? Yes No Do you object to a roommate who smokes? Yes No

What time do you get up in the morning? _____ What time do you normally go to bed? _____

Do you consider yourself a quiet person? Yes No Where do you prefer to study? room library elsewhere

Are you receiving any special medical treatment? Yes No If yes, specify: _____

Do you have any physical condition that prevents you from climbing stairs? If yes, specify: _____

Roommate preference (if known) (1) _____ (2) _____

Do you have any special reason for requesting a single room? If so, please specify: _____

Do you consider yourself a tidy person? Yes No

What type of music do you prefer? _____ Do you normally listen to music in your room? Yes No

PART F – ADDITIONAL INFORMATION

Studying in another country requires considerable adaptability. This is part of both the challenge and the reward. Your willingness to answer these questions will assist the AIFS staff in providing you with a housing situation that is most likely to meet your needs. Please note that specific requests cannot be guaranteed.

Do you have any special dietary needs?* If yes, please describe _____

Do you consider yourself a conservative or liberal person? Conservative Moderate Liberal

Do you have any allergies or chronic ailments? Yes No If yes, please describe _____

Are you presently under treatment for any mental or emotional matters? Yes No If yes, please describe _____

Are you presently taking any prescription medication on a regular basis? Yes No If yes, please list and state purpose _____

Studying abroad requires a great deal of physical mobility. Do you feel you are able to perform the essential functions of studying abroad with or without any special requirements?* If you do have special requirements, describe the requirement you would need and how this would enable you to participate.

**AIFS cannot guarantee to accommodate special requirements and requests.*

Agreement and Release Form

I, the undersigned, (and my parents or guardian if I am a minor), an Applicant for an overseas study program of the American Institute For Foreign Study, Inc. (the "Institute"), acknowledge that I have read and accept the terms and conditions set forth in the AIFS application/brochure, which are incorporated in this agreement. I acknowledge that I am responsible for reading all information provided in the AIFS pre-departure materials, whether sent by mail or posted online, and abiding by all policies contained therein. I understand that I must be 18 years of age by the date of departure. This agreement is a legally binding contract. I acknowledge and accept the terms of the refund policy as outlined below:

If a participant withdraws in writing

On or before January 6, 2012

After January 6, 2012, but on or before February 1, 2012

After February 1, 2012

She/he receives

All fees paid less \$150 plus any non-refundable deposits paid either by the student or by AIFS on the student's behalf.

All fees paid less \$450 plus any non-refundable deposits paid either by the student or by AIFS on the student's behalf.

No refund, and student is responsible for entire program fee.

All requests for refund must be made in writing, signed, and addressed or faxed to: **Registrar, AIFS, Partnership Programs, College Division, River Plaza, 9 West Broad Street, Stamford, CT 06902; fax number (203) 399-5597. Unsigned withdrawal statements will not be processed.**

I unconditionally release the Institute from any claims for damage, injury, loss, or expense of any nature resulting from events beyond its control, including without limitation: Acts of God, war, strikes, crime, terrorism, sickness or quarantine, government restrictions or regulations. This release also applies to any losses arising from the use of any vehicle or from the selection of, or from any act or omission by any host family, bus or car rental agency, steamship, airline, railroad, taxi or tour service/organizer, hotel service, hotel, restaurant, school, university/college, or other firm, agency, company or individual, unless the loss is caused by the gross negligence of the Institute.

I understand that I am responsible for exercising caution and common sense at all times to avoid injuries, and that the Institute cannot provide supervision or support during periods of independent travel.

I agree that if I become ill or incapacitated, the Institute or its emergency assistance company may take such actions as it considers necessary under the circumstances, including securing medical treatment for me and transporting me to the United States. I release the Institute from any liability relating to this medical care. I also authorize the Institute to take whatever action it deems to be necessary and in my best interest (including transporting me out of the host country or back to the United States, at my own, or my parents' expense) in the event of political unrest or any other unforeseen event or condition. If the Institute incurs on my behalf any costs not covered by its general liability insurance, I (and my parents) agree to make immediate repayment upon my return.*

I will comply with the Institute's rules, standards and instructions, and understand that failure to do so may result in being sent home at my (or my parents') expense, with no refund. I understand that my participation may be terminated if I am expelled from school or otherwise disciplined by school or civil authorities, or if the Institute, in its sole discretion, determines that my conduct is incompatible with the interests, harmony, comfort or welfare of the other students. I (and my parents) agree to indemnify the Institute if I do anything that causes the Institute to sustain financial loss or liability.

I understand that the Institute provides insurance coverage for my benefit while in the program, including limited health, accident, accidental death, personal effects and program fee refund insurance. I acknowledge that it is my responsibility to understand the limitations of this coverage and agree that the Institute is not responsible for any uninsured losses.

I understand that the Institute reserves the right to make changes, cancellations or substitutions in cases of changed conditions or emergency, or based upon the interest of the group. I understand if I am terminated from the program, there will be no refund of AIFS fees.

I understand that obtaining a passport and any other required travel documents is my sole responsibility, and I agree to hold the Institute harmless in the event that I am unable to obtain the necessary documents for participation in the program and to indemnify the Institute for any costs to it that result from my failure to obtain the required documentation.

I understand that if I am not a U.S. citizen, a visa may be required for entry to the countries I plan to visit (or travel through) while a participant on this program. I further understand that it is my sole responsibility to determine my visa requirements and obtain the appropriate visa(s), and I agree to hold the Institute harmless in the event that I am unable to obtain the necessary documents and visas for participation in the program and to indemnify the Institute for any costs to it that result from my failure to obtain the required documentation.

I understand that from time to time the Institute's publicity material may include statements by its participants and/or their photographs, and I consent to such use of my comments and photographic likeness.

This agreement will be effective when my application is accepted by the Institute and shall be governed by the laws of the State of Connecticut. This agreement cannot be modified except in writing by the Institute.

References in this agreement to "the Institute" shall include the American Institute For Foreign Study, Inc., and all of its agents, employees, affiliated companies, campus directors, chaperones, group leaders, teachers, host school and school officials. All references to "parents" of the applicant shall include the legal guardian or other adult who is responsible for, and authorized by law or court order to make legal decisions and to enter into binding contracts on behalf of the applicant.

If I am using financial aid to pay for all or part of my AIFS program fees, and if that aid is canceled or reduced by my institution or lending agency after I have embarked on the AIFS program, I am immediately responsible for full payment of all fees. Failure to make payment will result in my administrative withdrawal from the program.

Signature of Applicant

Date

I certify that I am the parent or legal guardian of the Applicant, and that I have read the foregoing Agreement and Release (including such parts as may subject me to personal financial responsibility), and hereby waive any claim that I might have against the Institute or its agents (as set forth above), both in my own behalf and in my capacity as legal representative of the Applicant, any claim arising from the Applicant's participation in the program. I confirm that my son/daughter will be 18 years of age by the program departure date.

Signature of Parent/Guardian if Applicant is under 18 years of age

Date

*A special substitute paragraph is available to members of the Christian Science faith.