

## Student Responsibility Statement

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- I understand that I will be allowed to participate in a DU sponsored study abroad program as long as I maintain satisfactory academic and judicial records. Acceptance into an individual program, however, is subject to the host program's qualifications and decision.
- I understand that I must obtain a valid passport to travel abroad. I understand that if I do not have a valid passport, I will apply for one immediately.
- I understand that it is my responsibility to determine if I am required to obtain a student visa for the country where I will be studying, and that, if I do need a visa, I will apply for it in a timely manner.
- I understand that whenever possible, I will obtain advance course approvals for the courses I plan to take while abroad.
- I understand that I must attend a pre-departure orientation session administered by DU, as applicable for my program.
- I understand that it is my responsibility to research and fully comprehend the financial obligations and impact of my program, including personal expenses.
- I understand that it is my responsibility to work with the Financial Aid Office to determine how and when my financial aid will apply and verify that the proper paperwork has been completed prior to my departure for the program.
- If I wish to claim a disability, I understand that it is my responsibility to submit a request for any accommodations for which I may be eligible while studying abroad through the DU Disability Services Program.
  - Furthermore, I understand I am responsible for working with the appropriate DU staff to develop an action plan on how I will accommodate my disability while studying abroad.
  - Furthermore, I understand that the legal mandates that protect a person with a disability in the United States do not extend beyond the borders of the United States. I understand that working with the appropriate offices at DU, I should research the programs and services available at the host institution well in advance of my arrival.
- I understand that I must carry health insurance that provides coverage for medical care received while abroad and that it is my responsibility to understand how this insurance covers me while I am abroad.
- If I have any pre-existing health issues, it is my responsibility to consider how these might impact my experience and research whether necessary treatment will be available in my program location.
- I understand the withdrawal, cancellation, and refund policies and procedures as outlined on the DU Office of International Education website for DU Partner Programs. If I am participating on another type of program sponsored by DU, or an unaffiliated program, I am responsible for researching and verifying the withdrawal, cancellation, and refund policies and procedures for my program.
- I understand that DU and/or the partner institution/program may opt to cancel or evacuate a program at any time due to concerns for student safety. I also understand and agree that if DU and/or the partner institution/program takes such action, I will leave immediately as instructed.
- If I am an undergraduate student participating on a quarter-length or longer program, I understand that I will complete a pre-departure survey and upon return I will complete a post assessment survey.
- I understand that the Office of International Education will communicate with me via email, and it is my responsibility to check and maintain my "preferred" off-campus email account.
- I understand that I may be asked to help with the recruitment and orientation activities of the DU Office of International Education upon my return from the program. This may include helping

at the study abroad fair, participating in orientation sessions, or answering prospective student questions.

I have read all points of information carefully and fully understand them.

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Student Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Student ID