



Participant Profile

International Student Exchange Program

U.S. Students

Please read "How to Apply" on the ISEP Web site before completing this form. Type or print clearly in BLOCK LETTERS. Be sure to submit the original application and a complete copy of your entire application to ISEP.

1. Name (as it appears on your passport or birth certificate) _____ Sex: male female
last (family or surname) first (given) middle or maiden

2. Home institution: _____ Student ID: _____

3. Please write your address as it would appear on an envelope, using one line for each line of your address.

Present address: _____ (valid until ____/____/____) Permanent address: _____
month / day / year (mail will be sent here after date given at left. Attach summer contact address, if different.)

telephone (with area code): _____ telephone (with area code): _____
email: _____ email: _____

4. If you participate in ISEP, do you permit ISEP to give your e-mail address to other students? Yes No

5. Country or countries in which you have citizenship: _____ Legal permanent residence: _____

6. Date of birth: ____/____/____ (ex: Sept. 18, 1980) 7. Place of birth: _____
month / day / year city state and country

8. Person(s) to contact in case of emergency:
Name (s): _____ Relationship to you: _____
Address: _____
Telephone (with area code): _____ Email: _____

9. Will dependents accompany you during the program? Yes No If yes, please list the name(s), birthdate(s), and relationship(s) on a separate sheet.

10. Do you have any special needs or require special services during your program (i.e., dietary considerations, learning aids, or facilities with handicapped access)?
 Yes No If yes, please describe on a separate sheet.

11. Completion of this question is voluntary. Your cooperation is greatly appreciated and will not affect the outcome of your application. Please check the box(es) that best describe your ethnic origin.
 African-American Asian or Indian Subcontinent Caucasian Hispanic/Latino
 Multi-racial Native American Other: _____

12. Major field: _____ Minor field: _____ Expected Graduation date: ____/____
month / year

13. Cumulative GPA: _____ 14. Principal field(s) of study during exchange: _____

15. Indicate the academic level at which you are requesting an ISEP program: sophomore junior senior graduate

16. Indicate the duration for which you are requesting an ISEP program (check one):
 one semester two semesters Beginning date requested: ____/____
month / year

17. I authorize the ISEP coordinator at my home institution to send my official academic records/transcripts to ISEP, and I authorize ISEP to send them to ISEP coordinators at prospective host institutions. I understand that official academic records/transcripts of work I undertake at my host institution will be sent to ISEP, and, in turn, to my home institution.

I attach the application fee. I agree to notify my home institution coordinator immediately if I no longer want to be considered for ISEP placement. I recognize that withdrawal does not entitle me to a refund of the application fee.

If I accept placement, I agree that:

- I will take part in all aspects of the program, including orientation and evaluation.
- I will submit a completed ISEP participant evaluation at the end of my program.
- I will pay to my home institution the designated program fee covering the full period of my placement.
- If accepting an ISEP-Direct placement, I will pay the \$500 non-refundable program deposit at time of acceptance. This deposit will be applied towards the full program fee.
- I will have the status of non-degree student unless I have been admitted to a degree program by my host institution.
- My placement will be limited to the period specified. An extension request is subject to review and approval by my home and host institutions and ISEP.
- My placement may be terminated by ISEP or by my host institution if I fail to remain enrolled full time at my host institution, fail to maintain minimum academic standards as defined by my home or host institution, or am found by ISEP or the host institution to be in violation of laws or regulations of my host country or institution.
- If I withdraw from the program anytime after accepting the placement, or if my placement is terminated after I arrive at my host institution:
 - a) I may still be obligated to pay the full program fee at the discretion of my home institution in collaboration and agreement with ISEP and my host institution.
 - b) I will forfeit my right to receive benefits as an ISEP participant and must reimburse my host institution for any money advanced to me to cover benefits after the date of my withdrawal or termination.
 - c) I will still be obligated to pay the application fee.

ISEP seeks to ensure that benefits and services outlined in the ISEP Terms of Participation for Institutional Members are provided by institutions cooperating with ISEP and shall seek to correct any inadequacies brought to its attention. I understand that ISEP's responsibility to participants does not extend beyond such endeavors and that ISEP is not liable to any participant for benefits not provided by the participant's home or host institution.

I acknowledge that all statements in this application are complete and accurate to the best of my ability. I have read and understand the terms and conditions of undertaking an ISEP program. **I AM AWARE THAT IT IS MY RESPONSIBILITY TO OBTAIN ALL VISAS AND TO ARRANGE AIR TRAVEL.**

Applicant's signature

Date

Applicant's name (type or print)

Home institution

The International Student Exchange Program, Inc. (ISEP) is an independent nonprofit membership organization of institutions of higher learning in the United States and abroad. It is the policy of ISEP and of all its member institutions in the United States not to discriminate on the basis of sex, color, race, ethnic or national origin, sexual orientation, religious affiliation or physical handicap in offering or confirming placement of ISEP participants.