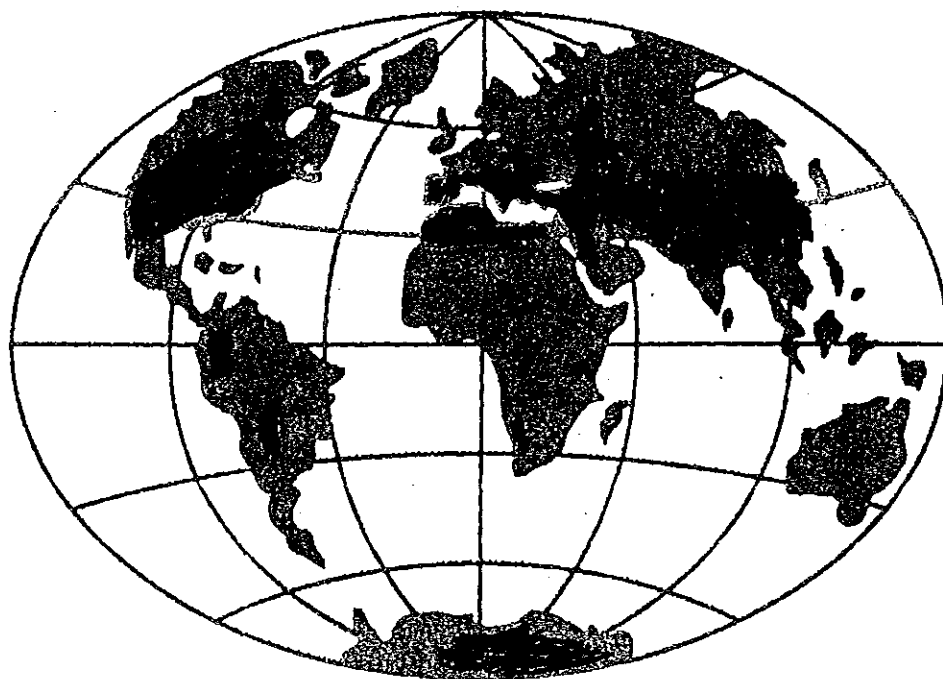


# Department of Modern Languages



## STUDY ABROAD APPLICATION BOOKLET



WASHBURN  
UNIVERSITY



## **Study Abroad Application Instructions**

Washburn University • Department of Modern Languages

1700 SW College Ave. • Topeka, KS 66621

Phone (785) 670-1714

[modern-languages@washburn.edu](mailto:modern-languages@washburn.edu)

[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

**Deadline for Financial Aid Consideration: February 15 for Summer, Fall, and Spring semesters**

### **A COMPLETE Washburn University Application Consists Of:**

☐ **Completed Study Abroad/Applicant Profile** for programs administered through WU, plus one copy of completed application from non-WU programs (for example: IFSA, ISA & CCIS)

☐ **Statement of Purpose**

- Attach a typed, one-page statement of purpose (250 word minimum) explaining your reasons for wanting to study abroad.
- Be sure your name, WIN number, the date, and your program name are in the upper right corner of the page.

☐ **Two Letters of Academic Reference** (forms attached)

- Reference forms are attached. Collect the finished references in sealed envelopes to turn in with your materials.

☐ **Student Transcript**

- All applicants: A transcript is necessary for this application (it can be student-issued).
- WU students may pick up a transcript from the Registrar's Office in Morgan Hall 115.

☐ **Copy of Health Insurance Card**

- Provide a copy of your health insurance card. It is your sole responsibility to ensure that your health insurance coverage is adequate and satisfactory for any injuries or illness that might befall you while abroad.
- Unless the program abroad provides health insurance, you should have valid insurance while you are abroad, or obtain Outbound Domestic Student Health Insurance. Please visit the Department of Modern Languages or the International Programs Office for more information.

☐ **Signed Information Consent and Release Form** (attached)

☐ **Medical Release Form** from Washburn University's Student Health Services or your personal physician

☐ **Copy of Passport**

- If you do not have a passport, you can obtain an application form online at <http://travel.state.gov/passport/index.html/>. You can process the application at the Downtown or North Topeka Post Office. Call (785) 295-9160 for more information.
- Once you receive your passport, sign it and make a copy of it to turn in to the International Programs Office. If you already have a passport, please turn in a copy with your application. Passports should be valid for at least 6 months after your anticipated return date.

## **Additional Information and Requirements:**

### **Minimum GPA Requirement**

All students applying for study abroad scholarships through the Department of Modern Languages must be in good standing and have a cumulative GPA of at least 3.0.

### **Passport**

You may be in the process of applying for your passport when you submit this application.

### **Visa Requirements**

**Semester and year-long programs will require a student visa for your country of study.** This normally requires additional paperwork, fees & passport photos. Talk to your Study Abroad Advisor for specific requirements.

### **Travel Cancellation Insurance**

To cover trip cancellation, lost luggage, etc. This insurance is optional but strongly recommended. Contact the IP Office or your travel agent if you are interested in adding this additional protection.

### **Attend Orientation**

All WU students accepted to a program must attend the orientation **AS A CONDITION OF PARTICIPATION.**

### **Update Contact Information**

Both the WU International Programs Office and the Department of Modern Languages use **E-MAIL, PHONE AND CURRENT ADDRESS** to deliver critical information and materials to applicants and participants. Applicants who do not keep the IP Office and the Department of Modern Languages updated are in jeopardy of missing critical information, which may mean losing a place in the program. It is your responsibility to submit changes in your (or your emergency contact's) e-mail, postal address or phone number to the IP Office in the International House and the Department of Modern Languages in **MO375 IN WRITING.**

### **Withdrawal**

Students who want to withdraw their application for any reason or want to withdraw from a program while abroad must do so **IN WRITING.** Students not completing a program for which they have received a scholarship **will be required to repay the money awarded.**

**ONLY COMPLETE APPLICATIONS WILL BE CONSIDERED FOR ACCEPTANCE.**

**PLEASE SUBMIT ALL APPLICATION MATERIALS IN A MANILA ENVELOPE OR FOLDER TO THE DEPARTMENT OF MODERN LANGUAGES, MO375, WASHBURN UNIVERSITY, 1700 COLLEGE AVENUE, TOPEKA, KS 66621.**

**REMEMBER: Deadline for Financial Aid Consideration is February 15 (for Summer, Fall, and Spring).**

## Study Abroad Applicant Profile

Washburn University • Department of Modern Languages  
1700 SW College Ave. • Topeka, KS 66621  
Phone (785) 670-1714  
[modern-languages@washburn.edu](mailto:modern-languages@washburn.edu)  
[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

**Deadline for Financial Aid Consideration: February 15 for Summer, Fall, and Spring semesters**

### Program to which you are applying:

### Term/Year

Name of program/university: \_\_\_\_\_

☐ Spring \_\_\_\_\_

☐ Summer \_\_\_\_\_

City and Country of program: \_\_\_\_\_

☐ Fall \_\_\_\_\_

### Personal Data:

\_\_\_\_\_  
Last name

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
WIN number

\_\_\_\_\_  
Social Security Number (for insurance enrollment)

\_\_\_\_\_  
Citizenship

If you are not a US citizen what is your residency status, or what type of visa do you have? \_\_\_\_\_

### Current address:

Valid until \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Telephone

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

Cell phone

\_\_\_\_\_  
Street

\_\_\_\_\_  
City, State, zip code

\_\_\_\_\_  
Email where you can be reached

### Permanent address:

Where mail will always reach you

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

Telephone

\_\_\_\_\_  
Street

\_\_\_\_\_  
City, State, Zip code

### Emergency Contact(s)

Person who will always be available

\_\_\_\_\_  
Name(s)

\_\_\_\_\_  
Relationship to you

(\_\_\_\_) \_\_\_\_\_  
Telephone

\_\_\_\_\_  
Street

\_\_\_\_\_  
Email

**Academic Data:**

\_\_\_\_\_  
Institution where you are currently enrolled

Current: ☐ Fr ☐ So ☐ Jr  
☐ 4<sup>th</sup> ☐ 5<sup>th</sup> ☐ Grad ☐ Other

\_\_\_\_\_  
Major

\_\_\_\_\_  
School/College

\_\_\_\_\_  
Secondary major or minor (if applicable)

\_\_\_\_\_  
School/College

\_\_\_\_\_/\_\_\_\_\_  
as of semester/year  
GPA

\_\_\_\_\_  
Hours completed by start of program

\_\_\_\_\_  
Expected grad. Date (sem/yr)

\_\_\_\_\_  
Name of academic advisor

\_\_\_\_\_  
Languages studied and number of years of training

Have you studied abroad previously? ☐ Yes ☐ No

\_\_\_\_\_  
If yes, please explain

\_\_\_\_\_  
Other Institution(s) attended:

Courses currently enrolled in:

\_\_\_\_\_  
List extracurricular activities, scholarships and honors:

**Agreement:**

I affirm that the information given in this application is true and correct to the best of my knowledge. I understand that if my application is approved, I will attend pre-departure orientation, submit a brief report and participate in promotional events for study abroad after returning to WU.

\_\_\_\_\_  
Name of applicant

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

**Approval of parent or guardian (for student under 18)**

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

**Complete this page if you would like to apply for a Modern Languages Scholarship**

**Study Abroad Scholarship Application**

Washburn University • Department of Modern Languages

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Phone (785) 670-1714

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[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

**Deadline for Financial Aid Consideration: February 15 for Summer, Fall, and Spring semesters**

Scholarships are recommended on the basis of the following factors: references, statement of purpose, academic achievement, previous study abroad experience, cost of program, demonstrated need, and other factors as appropriate. Awards vary depending on the length and cost of program and the strength of the application. The number of applicants and the amount of funds available for use affect the average amount from year to year.

1. Parent's income last year (if you are claimed as a dependent)    \$ \_\_\_\_\_

2. Number of other dependents in your family: \_\_\_\_\_

3. If you are no longer listed as a dependent, indicate how you are financing your education:

a. employment        \$ \_\_\_\_\_                      b. student loans        \$ \_\_\_\_\_

c. scholarships        \$ \_\_\_\_\_                      d. other (\_\_\_\_\_) \$ \_\_\_\_\_

Note: In most cases, scholarships you receive to attend Washburn can be applied to your study abroad program.

4. What is the estimated cost of the program for which you are applying (use the "Student Study Abroad Budget" on the next page to estimate the cost of your program)?    \$ \_\_\_\_\_

5. How much can you contribute to the cost of the program?        \$ \_\_\_\_\_

6. How do you plan to raise the other expenses? \$ \_\_\_\_\_ source \_\_\_\_\_

7. Have you received financial assistance for previous study abroad?    ☐ Yes    ☐ No

8. If the answer is yes, what program(s) have you participated in? (include year/term) \_\_\_\_\_

### Study Abroad Program Budget

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[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

Program Title: \_\_\_\_\_

Program Coordinator: \_\_\_\_\_

Departure date: \_\_\_\_\_

Return date: \_\_\_\_\_

Tuition	
Airfare	
Passport & Visa (if applicable) fee	
Emergency Medical Evacuation Insurance	
Local transportation	
Lodging	
Meals	
Books	
Sight Seeing Trips	
Personal Expenses	
Other Expenses (i.e. Health Insurance if you do not have sufficient coverage, Fees paid to host university)	
Total Program Cost	



## Study Abroad Reference Letter Form

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[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

### Part 1: To be completed by student

\_\_\_\_\_  
Last name

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
WIN number

\_\_\_\_\_  
Name of program

\_\_\_\_\_  
City, Country

☐ Fall 20\_\_ ☐ Spring 20\_\_ ☐ Academic Year 20\_\_-20\_\_ ☐ Summer 20\_\_  
Semester of enrollment

**To the applicant:** Under the U.S. federal law (section 438 of Public Law 90-247, as amended), students are permitted access to certain educational records. Section 438(a)(2)(B) provides that a student may waive the right to inspect confidential letters of recommendation. Many applicants have found that recommendations may have greater effect when written in confidence. If you waive your right to inspect the information in this form, please sign below.

X \_\_\_\_\_  
Applicant signature (optional) Date

### Part 2: To be completed by instructor

Students participating on study abroad programs are chosen on the basis of their academic records, personal qualifications and evaluations by professors. Because a cooperative spirit and an awareness of his/her position as a representative of the university are necessary for study abroad, please indicate how you think this applicant will make use of an academic opportunity abroad, taking into consideration his/her character, adaptability, stability and academic competence in comparison with other students at similar stages in their careers.

#### A. How long and in what capacity have you known the applicant?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### B. General Preparation

	Excellent	Good	Fair	Poor	Unknown
Articulateness in speech and writing					
Adaptability					
Ability to work independently					
Academic potential					
Emotional stability					
Maturity					
Self-discipline and self-reliance					
Ability to get along with others					
Respect for other cultures					

### C. Comments

Please comment as specifically as possible on the applicant in terms of the following:

1. Academic suitability for studying abroad
2. Personal suitability for living abroad
3. Known weaknesses relevant to studying abroad
4. Linguistic preparation, if applicable
5. Any other factors for which you believe may affect a successful study abroad experience

### Instructor Information

X _____		_____
Signature		Date
_____	_____	_____
Name (please print or type)	Position/Title	Department/School
_____	_____	_____
Institution, City, State	Email	

Please return this form to the student in a sealed envelope to be turned in with their completed application or send to:  
The International Programs Office, Washburn University, 1700 SW College Ave., Topeka, Ks, 66621, 785.670.1051. Fax 785.670.1067

## Study Abroad Reference Letter Form

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[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

### Part 1: To be completed by student

\_\_\_\_\_  
Last name First name Middle name WIN number

\_\_\_\_\_  
Name of program City, Country

☐ Fall 20\_\_ ☐ Spring 20\_\_ ☐ Academic Year 20\_\_-20\_\_ ☐ Summer 20\_\_  
Semester of enrollment

**To the applicant:** Under the U.S. federal law (section 438 of Public Law 90-247, as amended), students are permitted access to certain educational records. Section 438(a)(2)(B) provides that a student may waive the right to inspect confidential letters of recommendation. Many applicants have found that recommendations may have greater effect when written in confidence. If you waive your right to inspect the information in this form, please sign below.

X \_\_\_\_\_  
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Students participating on study abroad programs are chosen on the basis of their academic records, personal qualifications and evaluations by professors. Because a cooperative spirit and an awareness of his/her position as a representative of the university are necessary for study abroad, please indicate how you think this applicant will make use of an academic opportunity abroad, taking into consideration his/her character, adaptability, stability and academic competence in comparison with other students at similar stages in their careers.

#### A. How long and in what capacity have you known the applicant?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### B. General Preparation

	Excellent	Good	Fair	Poor	Unknown
Articulateness in speech and writing					
Adaptability					
Ability to work independently					
Academic potential					
Emotional stability					
Maturity					
Self-discipline and self-reliance					
Ability to get along with others					
Respect for other cultures					

### C. Comments

Please comment as specifically as possible on the applicant in terms of the following:

1. Academic suitability for studying abroad
2. Personal suitability for living abroad
3. Known weaknesses relevant to studying abroad
4. Linguistic preparation, if applicable
5. Any other factors for which you believe may affect a successful study abroad experience

### Instructor Information

X _____		_____
Signature		Date
_____	_____	_____
Name (please print or type)	Position/Title	Department/School
_____	_____	_____
Institution, City, State	Email	

Please return this form to the student in a sealed envelope to be turned in with their completed application or send to:  
The International Programs Office, Washburn University, 1700 SW College Ave., Topeka, Ks, 66621, 785.670.1051. Fax 785.670.1067

## Study Abroad Consent and Release Form

Washburn University • Department of Modern Languages

1700 SW College Ave. • Topeka, KS 66621

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[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

I, \_\_\_\_\_ will be participating in a cross-cultural student abroad program ("Program") in \_\_\_\_\_  
For the \_\_\_\_\_ term.

I agree my participation in the Program is entirely voluntary and at my request and initiation. In consideration of my participation in the Program, I agree as follows:

### 1. Risks of Study Abroad

I understand and agree my participation in the Program involves risks not found in study at Washburn University. These risks include, but are not limited to: traveling to and within, and returning from, one or more foreign countries; foreign, political, legal, social and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; risks of injury, permanent disability or death; property damage and economic loss; natural disasters, civil unrest or hostilities; and terrorist activities or acts of war.

### 2. Independent Activity

I understand and agree that neither the University, the host institution or faculty of either institution will be supervising me at times when classes or activities within the Program are not in session and that I will have the opportunity and the right to engage in independent activities, including travel. I understand and agree risks referred to above in section 1 are also associated with any independent activities in which I may engage.

### 3. Institutional Arrangements

I understand and agree the University does not represent or act as an agent for, and cannot control the acts or omissions of, any host institution, host family, transportation carrier, hotel, tour organization or other provider of goods or services involved in the program. I also understand and agree the University is not responsible for matters, which are beyond its control.

### 4. Health and Health Insurance, Property Insurance, Medical Evacuation and Repatriation Insurance.

a. Health. I have consulted with a medical doctor with respect to my personal medical needs. I am aware of all applicable personal medical needs. I understand and agree I am personally responsible for payment of medical costs while participating in the Program and that the University is not obligated to attend to any of my medical or medication needs. I also understand and agree the standard of health care in a foreign county may not be of the same quality and type as available in the United States.

- b. Insurance. I understand and agree I have been advised to procure policies of insurance to:
- (i) provide payment for medical treatment and medication while participating in the Program;
  - (ii) provide compensation for property damage, loss of property and /or other economic loss while participating in the program;
  - (iii) provide for arranging and payment for medical evacuation to the United States in the event of serious illness or injury; and,
  - (iv) provide for the repatriation of my remains in the event of my demise.

5. Standards of Conduct

I understand and agree each foreign has its own laws and acceptable standards of conduct, including dress, manners, moral, politics, drug use and behavior. I understand and agree that behavior or conduct violating those laws or standards could be harmful to my own health and safety and could result in legal action against me under applicable law of such nation. I further agree that, in event my behavior or conduct shall subject me to legal action or I have or develop legal problems with any foreign national or foreign government, I shall be solely responsible for arranging and paying for any legal expenses association with such actions.

6. Assumption of Risks and Release

With full knowledge of the risks associated with travel to, from and within foreign countries and participation in the Program as outlined above in sections 1 and 2, I, for myself, my family, heirs, legal and personal representatives knowingly and voluntarily assume the risks and responsibilities associated with my participation in the Program and for my travel to and presence in foreign countries. Further, I agree, for myself, my family, and heirs, legal and personal representatives to release, indemnify and hold harmless Washburn University of Topeka, its Board of Regents, officers, agents, representatives employees and its successors and assigns from and against any and all loss, cost, damage, arising out of my participation in the Program including, but not limited to travel to, from and within any foreign country.

I have carefully read this Informed Consent and Release before signing it. No representations, statements or inducements, written or oral, apart from the foregoing written statement have been made.

---

Name of applicant

---

Signature of applicant

---

Date

**Approval of parent or guardian (for student under 18)**

---

Name of Parent/Guardian

---

Signature of Parent

---

Date

### **Study Abroad Credit Transfer Form**

Washburn University • Department of Modern Languages

1700 SW College Ave. • Topeka, KS 66621

Phone (785) 670-1714

[modern-languages@washburn.edu](mailto:modern-languages@washburn.edu)

[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

#### ☐ Step One:

Fill out the top portion of the Study Abroad Credit Transfer form on the reverse side.

#### ☐ Step Two:

Enroll in the correct WU course. If participating in an exchange program you will enroll in an Interdisciplinary Studies (IS) course which corresponds to the country where you will be studying. See the Study Abroad Coordinator for the correct course reference number. Foreign Language majors will need to contact their advisor about the courses they should enroll in. Visit your academic advisor for assistance in deciding which classes to take at your receiving foreign institution. The Advisor and Department Head will decide how the class at the foreign institution will transfer to WU credit.

#### ☐ Step Three:

Enjoy your semester/ year abroad! \*If your proposed coursework changes please contact the Study Abroad Coordinator to make the necessary changes to your Credit Transfer Form.

#### ☐ Step Four:

Before leaving your foreign institution, complete the necessary paperwork to ensure that your transcript is sent to: Washburn University, Office of International Programs, 1700 SW College Ave., Topeka, KS 66621, USA.

#### ☐ Step Five:

Upon returning to WU, contact the Office of International Programs to confirm that they have received your foreign transcript. Be patient- some schools take longer than others to send transcripts. Once the Office of International Programs has received your transcript, a grade posting request will be sent to the University Registrar.

Note: If you do not complete Step Two before leaving the USA, you will have to do it once you return. This can turn into a lengthy process, especially if you are graduating soon. The moral of the story: Do it before you leave!

\*If you decide to take different classes once you arrive at your host country email the study abroad coordinator with your new classes and ask that he/she request the appropriate transfer credit on your behalf. You may need to provide a syllabus or a class description, so be prepared to do so.

# Study Abroad Credit Transfer Form

Washburn University

_____ Last Name	_____ First Name	_____ M.I.	_____ WIN	
_____ Street Address	_____ City	_____ State	_____ Zip	_____ Major/Minor Dept
_____ Phone	_____ Email Address			

I plan to attend the study abroad program coordinated or approved by Washburn as designated below:

_____ City	_____ Country	_____ Host University/Program Provider
---------------	------------------	---

Dates of attendance for the study abroad program: From \_\_\_\_\_ to \_\_\_\_\_  
 Month/day/year Month/day/year

The following are the proposed study abroad courses:

Dept	Course	Sect	WU Study Abroad Course Title	Credit Hours	Host University Course Title	Washburn equivalent: Title Dept Course # Or 1XX or 3XX when no exact match exists

_____ Dept Chairperson's signature	_____ Date	_____ Academic Advisor's signature	_____ Date	_____ Student's signature	_____ Date
_____ Dept Chairperson's signature	_____ Date	_____ Academic Advisor's signature	_____ Date		
_____ Associate VP Academic Affairs' Signature	_____ Date	_____ Academic Advisor's signature	_____ Date	(Signature indicates approval of appropriate course content for general education—Final approval based on acceptance of general education transfer petition)	

Note: Evaluation of study abroad courses as potential general education transfer courses is a two-step process supervised by the Associate Vice President for Academic Affairs (AVPAA) located in Bradbury Thompson Alumni Center Room 200. Course content acceptability is determined prior to the study abroad. After returning from the study abroad experience, the student must submit a general education transfer course petition for approval by the AVPAA demonstrating how a minimum of three of the nine general education skills were enhanced by the study abroad course.

The following courses have been completed at the hosting institution, and based on that institution's official transcript, are recommended to transfer to Washburn University: *(Note: A letter grade will only be posted if the course is required for the student's major or minor. All other course work is posted as Credit.)*

Host University Course Title	Washburn Equivalent: Title, Dept, Crse # Or 1XX or 3XX when no exact match exists	Lower/Upper Level	Credit Hours	Identify Washburn requirement this course fulfills (major, minor, general education or elective)	Letter grade	

_____ Dept Chairperson's signature	_____ Date	_____ Academic Advisor's signature	_____ Date	_____ Registrar for Posting	_____ Date
_____ Dept Chairperson's signature	_____ Date	_____ Academic Advisor's signature	_____ Date		
_____ Associate VP Academic Affairs' signature	_____ Date	_____ Academic Advisor's signature	_____ Date	(Required only for approval of general education transfer courses)	



## **WTE in International Education**

Washburn University • Department of Modern Languages

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Phone (785) 670-1714

[modern-languages@washburn.edu](mailto:modern-languages@washburn.edu)

[www.washburn.edu/cas/ml](http://www.washburn.edu/cas/ml)

Every language major or minor is encouraged to complete the Washburn Transformational Experience in International Education with his/her study abroad experience. This WTE in International Education exposes students to the richness of history and culture beyond our shores through study abroad. The Department of Modern Languages makes scholarship funds available to help with the WTE and the whole study abroad experience. Below you will find information on the scholarship procedure, eligibility, and restrictions.

### ***WTE Scholarship Procedure***

1. **Declare** your International Education WTE online by visiting the student tab of My Washburn. .
2. Complete the **Study Abroad Admission and Scholarship Application Form**.
3. Submit an **Activity Plan** online at the My Washburn Student Tab.
4. The Study Abroad Scholarship Committee will meet to recommend awards. Decisions about whether to award a scholarship and, if so, the extent of the scholarship will be based on the overall strength of the application, including the student's GPA and letters of recommendation. The Director of International Programs will make recommendations to the VPAA for final approval.
5. Submit a **Pre-Trip Background Research Paper**.
6. Students receive the award after completing the Study Abroad and WTE pre-departure requirements (declaration, activity plan, and background research paper).
7. Students receiving scholarships are required to attend the Study Abroad Orientation session and expected to attend the Study Abroad Awards Ceremony.
8. At the conclusion of the program students are required to complete a **Final Written Assessment** and schedule a **Public Presentation**. A photo and testimonial of the benefit of studying abroad are also expected.

### ***Eligibility***

\*Undergraduate Degree-seeking students at Washburn with an average grade of at least "C"

\*Students who have declared the WTE International Education

*Note: Students seeking to study abroad as a second WTE and students going abroad for the second time will be considered only if there are available funds.*

### ***Restrictions***

1. Student's WTE proposal must be approved before funding can be disbursed.
2. Student must complete the entire WTE process (i.e., complete the Final Assessment and Presentation) in order to keep the award. Otherwise, the return of funds or partial funds is expected. A "financial hold" will be placed on the student's record until clearance has been achieved.

**To learn more about the Washburn Transformational Experience contact the Center for Undergraduate Studies and Programs (CUSP), Morgan 122, 670-2299 or visit:**

**[www.washburn.edu/wte](http://www.washburn.edu/wte)**





To be completed upon acceptance of a scholarship award

WASHBURN UNIVERSITY

PROMISSORY NOTE

I, \_\_\_\_\_, of lawful age promise to pay to Washburn University, 1700 SW College Avenue, Topeka KS 66621, the sum of \$\_\_\_\_\_, the amount of a funds provided me by the University's Department of Modern Languages to study abroad for the \_\_\_\_\_ academic term, plus reasonable attorney's fees and other costs and charges necessary for the collection of this note, in the event I shall have failed to participate in or complete the requirements of program of study abroad for which the funds were provided.

This promissory note shall be governed by and construed in accordance with, the laws of the state of Kansas.

\_\_\_\_\_  
Printed name of student

\_\_\_\_\_  
Signature of student

Date \_\_\_\_\_

\_\_\_\_\_  
Witness

