



Application for Off-Campus Study

Please return completed form to Dr. Heather St. Peters in the Friesen Center, Student Life, first floor of the HUB.

Deadline to apply is February 15 for the following Academic Year (Fall and Spring)

Section A – Student Information

Student Name _____ ID # _____

Phone # _____ Classification during study: ___SO ___JR ___SR

Current GPA: _____ Major(s) _____ Minor(s) _____

International Student: YES NO

Please note:

- For affiliated programs, all tuition costs are paid to Huntington University, and Huntington then pays the organization for your costs of participation.
- Institutional aid may be approved for use by a limited number of students participating in affiliated programs. Students participating in other off-campus programs may also be approved to utilize institutional aid if funding permits. The signatures on this form do not indicate that a decision has been made about whether you may receive financial aid awards.
- Signatures on this form indicate approval for you to participate in the requested off-campus program and to transfer credits from that program to your Huntington University record. The signatures do not indicate that these credits will substitute for specific requirements in your degree program. Please contact the Registrar’s office to discuss how these credits may apply to your degree requirements.
- All students studying off campus will be required to purchase Faith Ventures Travel Insurance unless insurance is provided by the program.

Section B – Off-Campus Study Program Information

Program Name _____ Organization _____

Term of Study: ___Fall ___J-Term ___Spring ___Summer Year: _____

Travel Insurance: ___ \$45/year

Section C – Approval Signatures

You must obtain signatures from your academic advisor, the financial aid office, the business office and student development before the *Registrar* or *Dean* will sign your application to the off-campus program.

1. _____	2. _____
Academic Advisor	Financial Aid Office
Date	Date

3. _____	4. _____
Business Office	Registrar
Date	Date

5. _____	6. _____
Student Life	Academic Dean
Date	Date

7. _____
Friesen Center Director
Date