

Office Use Only:	Date Submitted:	Passport:
	Time Submitted:	Deposit (\$1000):
	Preliminary Acceptance:	Full Acceptance:

MBI International Study Program Application



Moody on a Boat – Summer 2017

A digital, color scan of your passport must be submitted along with the application.
Please email passport scans to: studyabroad@moody.edu.

Name:	Student ID:
Email:	CPO:
Campus: (Circle) CHICAGO SPOKANE MDL OTHER	
Cell Phone:	
Home Phone:	

Classes Offered:
<p>Session I –</p> <p>_____ TH <i>Ancient Faith: Christian Spirituality in the Liturgical Tradition</i> (3 credit hours) Dr. Bryan Litfin and Dr. Laurie Norris (Counts as either a Pastoral or Theology Elective)</p>
<p>Session II –</p> <p>_____ BI-2214 <i>Acts</i> (3 credit hours) – TBD (Counts as a New Testament Bible Elective)</p>

**Acknowledgement of Terms and Conditions for Participation in Moody Bible Institute's Study
Abroad Program**
Moody on a Boat Summer 2017

By signing below, I acknowledge that I have read, and agree to, the following terms and conditions for participating in Moody Bible Institute's Study Abroad Program.

I confirm that I have read and understand any U.S. Department of State Travel Warnings, Public Announcements, and Consular Information Sheets issued about my intended destination(s). I also confirm that I am not required to travel abroad in order to satisfy any requirements for graduation at Moody Bible Institute. I understand that I am solely responsible for my safety, that I assume responsibility for any and all risks associated with my time abroad, and that I have the right to leave and/or terminate the program if I feel unsafe. I also recognize that early termination could result in the loss of program credit and that changing travel plans could incur additional costs, which would be my responsibility.

In agreeing to participate in Moody Bible Institute's Study Abroad Program I understand and accept that, depending on the specific program, MBI may work through another school, organization, or travel agency to arrange for transportation and lodging. I understand that Moody Bible Institute is providing these services only as a convenience to participants and that, accordingly, it assumes no responsibility or liability, in whole or in part, for any act, error, omission, damage or injury to person or property of any nature, loss, accident, or any delay caused to me or others prior to departure, while traveling, or while residing abroad. Neither shall Moody Bible Institute be responsible to any person for any of my acts or omissions.

I agree to release, indemnify, and hold harmless Moody Bible Institute from and against any claim or cause of action which I, the participant, my parents or guardians, or any other person may have for any losses, damages, or injuries, including death, arising out of or in connection with my participation in this Study Abroad Program.

Participant Signature: _____ *Date:* _____

Participant Name (printed): _____

If participant is under 18 years of age:

Parent/Guardian Signature: _____ *Date:* _____

Parent/Guardian Name (printed): _____

Moody Bible Institute Moody on a Boat Summer 2017
COMMUNITY LIFE STANDARDS and FINANCIAL PROCEDURES AGREEMENT

PLEASE READ AND CONSIDER THE FOLLOWING: Participation in an overseas academic program involves a more intimate community than the usual campus situation. In view of this, each student is expected to bear a greater level of responsibility and accountability. Each participant should provide support, encouragement, and an example of positive Christian conduct.

I. CONDUCT

INTEGRITY is an assumed characteristic of all participants. The following behavior or activities would be a compromise of personal integrity, and these violations will involve grade reductions or dismissal from the program:

1. Dishonesty, lying, deceit, theft, plagiarism, or cheating.
2. Possession of narcotics or drugs not authorized by a physician.
3. For enrolled MBI students and anyone under 21, consumption of alcohol or tobacco products.
4. Intoxication under any circumstances.
5. Inappropriate sexual behavior not in accord with traditional/biblical moral standards.
6. Failure to attend daily planned activities (except in the case of injury or illness).
7. Renting scooters, cars or any other motorized vehicle.

Injuries sustained by the following activities will not be covered by our insurance: Body piercing, tattoos or any activity that creates potential for infection or spread of infectious disease. Mountaineering where ropes or guides are used; hang gliding; parachuting; bungee jumping; racing by horse, motor vehicle, or motorcycle; snowmobiling; motorcycle riding; scuba diving; spelunking, and parasailing.

There will be ample opportunity for free time. However, please remember this program is first and foremost an *academic semester*.

II. FINANCES

All fees are non-refundable once they are submitted to the tour company. In some cases, substitutes may be arranged for a small fee.

1. A non-refundable \$1000 payment (see webpage for payment instructions), along with the Personal Profile Form, MBI International Study Program Application, Acknowledgement of Terms & Conditions Form, and Community Life Standards & Financial Procedures Form, secures a spot in the program.
2. Final Amount Due will be approximately \$4955 (in addition to the deposit). This amount will be due 2 weeks prior to departure.

PLEASE MAKE ALL CHECKS PAYABLE TO Moody Bible Institute

We appreciate your careful attention to these standards for the community life of the MBI Moody in Germany Study Abroad Program. Please be certain you have read and understand these standards and then indicate your covenant to observe them.

Signed: _____ *Date:* _____

Printed Name: _____

MBI Study Abroad Personal Profile Form

Please Print All Information Clearly in Black Pen and Block Capital Letters
All names provided should be stated precisely as they appear on the passport.

PROGRAM DETAILS

PROGRAM NAME:

PROGRAM LEADER:

PERSONAL DETAILS

LAST NAME: FIRST NAME:

MIDDLE NAME(S): TITLE: (Mr/Mrs/Ms)

CITIZENSHIP: GENDER: (male or female)

DATE OF BIRTH: AGE: (must be as of program start date)

PASSPORT NUMBER: COUNTRY OF ISSUE:

EXPIRY DATE:

MEDICAL INFORMATION

DO YOU HAVE ANY SPECIAL MEDICAL CONDITIONS /REQUIREMENTS?

DO YOU HAVE ANY DIETARY REQUIREMENTS?

DO YOU HAVE ANY SPECIAL MEDICAL NEEDS?

EMERGENCY CONTACT INFORMATION

EMERGENCY CONTACT (FULL NAME):

EMERGENCY CONTACT (RELATION):

EMERGENCY CONTACT (ADDRESS):

STREET CITY STATE COUNTRY ZIPCODE

EMERGENCY CONTACT
(HOME PHONE):

EMERGENCY CONTACT
(CELL PHONE):

EMERGENCY CONTACT
(E-MAIL):

ADDITIONAL INFORMATION

ARE YOU A PAYING MEMBER OF
FACULTY OR A SPOUSE OR
DEPENDENT OF A PROGRAM
LEADER?

(please indicate if applicable)

DO YOU REQUIRE A SINGLE
ROOM?

(yes/no)

ANY OTHER RELAVANT
INFORMATION?