

Eligibility to Participate

Please complete and sign this authorization. Give this form with your application to the leader of the off-campus program for which you wish to apply.

Student Name: _____ Student ID _____

Off-Campus Program: _____

Program Dates: _____

Program Leader: _____

Program Leader phone number: _____ Email: _____

Student Authorization:

By signing this form I am indicating that I wish to apply to participate in the above designated, non-required off-campus program(s), and that I also authorize the release of information needed to verify this form by the Registrar, Dean of Students, Director of International Education, or their contacts(s), in order to determine my eligibility to submit an application for off-campus travel.

I unconditionally and voluntarily consent to the release of such records pursuant to this request.

Disciplinary Information (please check one):

- ☐ I am not and have never been on disciplinary probation.
- ☐ I am currently not on disciplinary probation, but have been in the past.
Explain: _____
- ☐ I am currently on disciplinary probation.
Explain: _____

Note: I further recognize and acknowledge, that should my judicial or student status change prior to my off-campus program's departure date, I may be denied permission to participate.

Signature _____

Date _____

****NOTE TO PROGRAM LEADER:** A copy of each students form must be sent to the Dean of Students no less than 72 business hours before departure. Unless otherwise noted, the Dean's email response will be sent to the Program Leader noted above.