



Date Scanned

Office of International Study
Study Abroad Authorization Form
(Updated September 2019)

As part of the study abroad process, students are required to provide Fairmont State University with information about their program and gather the authorizations and signatures below:

General Information

Name: _____ Student ID: F00 _____

Major(s)/Minor(s): _____

Advisor: _____ Date of matriculation: _____

FSU Email Address: _____ Phone #: (____) _____

Student Signature: _____

- 1. Program Sponsor:
(ex: KEI, ISEP, WVHEPC)
- 2. Program Destination:
- 3. Program Dates:
- 4. Financial Aid? Yes / No
- 5. Live in University Housing? Yes / No

University Authorization

A. Office of International Study – Jaynes Hall

I have met with the student and I verify the program is acceptable and authentic by academic and international study standards upheld by Fairmont State University. The student is authorized to proceed with plans and arrangements in other university offices.

_____ Date: _____

Erin Hippolyte, Ph.D., International Study Coordinator
Jaynes Hall 305 / 304.367.4598
ehippolyte@fairmontstate.edu

B. Financial Aid (if applicable) – Turley Center

I have met with the student to discuss procedures, scholarships, aid eligibility and forms required in order to apply financial aid to the study abroad experience. Student understands the disbursement schedule related to their specific aid package and that this schedule is not in the power of Fairmont State University to modify.

_____ Date: _____
Financial Aid Representative

_____ Date: _____
Study Abroad Student Signature

C. Housing/Residence Life & Student Conduct – Turley Center

I have met with the student to discuss procedures and forms required in order return to housing.

_____ Date: _____
Housing/Residence Life or Student Conduct Representative

_____ Date: _____
Study Abroad Student Signature

D. Student Accounts – Turley Center

I certify that the student is in good financial standing and eligible to participate in a study abroad program. The student understands that any charges for study abroad need to be paid before their trip.

_____ Date: _____
Student Accounts Representative

_____ Date: _____
Study Abroad Student Signature

E. Registrar’s Office – Turley Center

I authorize that the student is in good academic standing and academically eligible to study abroad. The student understands the procedure for receiving credit, and I approve of their preliminary plan for those credits.

_____ Date: _____
Shayne Gervais, Ph.D., Registrar

_____ Date: _____
Study Abroad Student Signature

Please note that the Registrar’s Office will return the form to the International Study Coordinator after all signatures are completed

Emergency Information

1. In the event of emergency, I authorize group leaders and/or representatives of Fairmont State University to contact the following person(s) and discuss details of my personal and academic situation:

Emergency Contact #1 (required)

Name: _____ Relationship: _____

City/Country of Residence: _____ Phone number: _____

Emergency Contact #2 (optional)

Name: _____ Relationship: _____

City/Country of Residence: _____ Phone number: _____

2. Include a scan of the first page of your passport, to facilitate replacement if lost

3. How can we contact you while abroad?

Location of study abroad: _____

Contact information abroad (phone or email): _____

Printed Name: _____

_____ Date: _____

Study Abroad Student Signature

I have received this completed form and specific information from the student about flights and program dates. Student has completed the attached pre-departure info and has also provided contact information for themselves while abroad.

_____ Date: _____

International Study Coordinator

To the Student: This form must be completed by a Student Conduct Representative. Fairmont State University's Judicial Affairs Office is located in the Turley Student Services Center. Your signature provides consent for release of this information.

Name: _____ Student ID: F00 _____

FSU Email Address: _____ Phone #: (____) _____

Student Signature: _____ Date: _____

This student has not received a judicial sanction at Fairmont State University.

This student is not currently under active judicial sanctions, but has been previously sanctioned as follows:

Adjudication Date	Sanction with Effective Dates

This student is currently under the following judicial sanction(s):

Adjudication Date	Sanction with Effective Dates

OFFICE USE ONLY

Student Conduct Representative (PRINT)

Student Conduct Representative Signature

Date: