

**Costa Rican Cultural Immersion Program  
2011 Program for Psychology and Pre-Med  
TERMS AND CONDITIONS AGREEMENT**

Read this document thoroughly. When you have read the Terms and Conditions of participation in the Costa Rican Cultural Immersion Program 2011 (hereafter referred to as Program); sign, date and send the documents in order to start with your application process.

1. **PROGRAM APPLICATION:** I am responsible for submitting all forms and identification materials by the specified due date(s), for following instructions for course registration, and for complying with requests related to my enrollment.

2. **PAYMENT OF FEES:** I accept the responsibility for coordinating timely payment for tuition and associated program fees and for following university procedures for financial aid and scholarships disbursement. I am responsible for making payment of all remaining account balances by the fee deadline or prior to the start of the program, whichever comes first, and I am responsible for all late fees and/or costs for collection of fees in accordance with standard Program procedures. Nonpayment of fees will jeopardize a student's continuing participation in the Program and may result in withdrawal or dismissal.

3. **COSTS RELATED TO WITHDRAWAL, DISMISSAL AND/OR ABSENCE:** I shall be solely responsible for any and all costs arising out of my voluntary or involuntary withdrawal or dismissal from the program prior to its completion, including withdrawal for reasons of health, family emergency, illegal drug or alcohol use or abuse, legal detention, etc., or disciplinary action by official representative(s) of the Program. Costs incurred on my behalf include, but are not limited to, moneys advanced on my behalf for nonrefundable deposits at other institutions, legal documents, special fees, and housing contracts. If I withdraw, depart, or am dismissed from a program for any reason prior to its formal completion, I will not be eligible for any academic credits, and further I understand that the fees charged for the program pay for the trip as a whole, and that I cannot be refunded for parts of it that I miss due to absence, withdrawal and/or dismissal. ***If you withdraw within 30 days prior to the start date of your program, you will be forfeit 18% of the total cost of the program. Cancellation or withdrawal after the program has started will result in the forfeiture of all fees.***

4. **TRAVEL TO PROGRAM SITE:** I am responsible for securing travel arrangements that will allow timely arrival to the program site for onsite orientation and for notifying of my itinerary in order to take advantage of the Program transportation service. I am responsible for investigating and applying for appropriate documentation, e.g. passport, visa, health certificate, financial statement. **I understand that UNIBE-CCIP will not be held liable for the price of the ticket or any fees associated with changing the ticket, should the program be cancelled for any reason.**

5. **PROGRAM CANCELLATION OR DATES MODIFICATIONS:** I understand that the Program may be canceled anytime before it has started. If cancelled, I understand I will receive a full refund of all paid fees. I understand that official representative(s) of the Program reserve the right to make modifications, replacements or substitutions of the Program in the interest of the Program and/or its participants. **I understand that CCIP strongly recommends that I purchase trip cancellation insurance as protection against the possible cancellation of a program due to low enrollment, world events, and any other unforeseen events.**

6. **HEALTH INSURANCE:** I understand the insurance begins upon disembarking from the plane after landing in Costa Rica not earlier than the arrival date indicated on the 2011 Program description and remains in force until boarding the plane leaving Costa Rica on the departure date indicated on the Program 2011, or before in case I leave Costa Rica earlier.

*Note: This is a summary of the coverage description and deductibles. For more details about these subjects and exclusions, or for a complete copy of the Master Policy, contact the official representatives of the Program.*

*The insurance policy covers: Hospital Room & Board, Local Ambulance, Intensive Care Unit, Hospital Pre-certification Penalty, Outpatient Treatment, Outpatient Prescription Drugs, Mental Health Disorders, Dental Treatment due to Accident, Dental Treatment to alleviate pain, Physical Therapy & Chiropractic Care, Intercollegiate, interscholastic, intramural, or club sports, Terrorism, Benefit Period for coverage after Policy Termination Date, Emergency Medical Evacuation, Emergency Reunion, Accidental Death & Dismemberment, Repatriation of Remains. The minimum deductible is \$100 per injury or illness, reduced to \$50 if treatment is from Student Health Center. All benefits are per covered individual and for covered conditions. All benefits are subject to the Deductible and Coinsurance unless otherwise indicated. Limits apply to all benefits. The insured person has to pay for all medical expenses required, complete the claim form and send it to the insurance company in order to get the refund.*

7. **DISABILITY ACCOMMODATIONS:** I accept the responsibility for registering with the official representative(s) of the Program to determine eligibility for services and accommodations related to disabilities, if appropriate; and further, I understand that an Access Plan outlining my accommodations should be submitted at least sixty (60) days before the program commencement date in order to assess and determine the ability of the university to provide a reasonable accommodation.

8. **COURSE LOAD:** I will comply with the Program's course requirement to enroll in the required minimum number of credit hours.

9. **ATTENDANCE:** I acknowledge that attendance is mandatory at all classes and course related outings and excursions except in cases of illness and/or emergencies beyond my control. Visits by family and friends are not reasons for an excused absence from class. With the exception of personal and family emergencies where the student and the official representative have made appropriate arrangements, students must remain in the program abroad for its entire duration in order to receive credit. There is no provision for making up a missed examination for any reason.

10. **FREE TIME:** I am responsible for travel, lodging, and meals during designated free times within the inclusive program dates, during periods of independent activity, and before or after the program.

11. **DISMISSAL:** I understand that the official representative(s) of UNIBE-CCIP has the right to dismiss me from the program at any time if: a) my conduct violates established rules of behavior; b) I violate laws, rules and regulations of my host country, community, institution, host family, Program; or c) the official representative(s) has reasonable cause to believe that my continued presence in the program constitutes a danger to the health or safety of persons, including myself, or property, threatens the future viability of the program, or brings the program into disrepute or its participants into legal jeopardy. I understand that a decision made to dismiss me from the program will be final; that separation from the program will result in the loss of all academic credit and terminate my status as a program participant; and I will not be entitled to any refunds and will remain responsible for costs incurred on my behalf. I understand that once dismissed I will not be allowed to remain in program facilities (such as housing) nor participate in any program group activities.

12. **ALCOHOL:** I understand that Program prohibits the illegal or otherwise irresponsible use of alcohol by students and that it is my responsibility to know the risks associated with alcohol use and abuse. Because I will be studying and traveling in countries where the legal age for alcohol consumption and/or rules regarding the consumption of alcohol are different than my country of origin, I accept the responsibility to know relevant country and local laws concerning the possession, use, and abuse of alcohol. If I am of legal age and choose to consume alcohol while abroad, I will be expected to drink and behave responsibly. The illegal or excessive consumption of alcohol or misconduct due to alcohol consumption will not be tolerated and will result in disciplinary action, including dismissal from the program and campus judiciary proceedings against me through the UNIBE-CCIP judicial system.

13. **DRUGS:** Illegal drugs in any form are not tolerated. Possession or use of illegal drugs is punishable by fine, imprisonment, and/or deportation. Student participants found using or possessing illegal drugs in any form are subject to immediate dismissal from the program and campus judiciary proceedings through the UNIBE-CCIP judicial system.

14. **ASSUMPTION OF RISK:** I understand that I am the one responsible for my safety and the safekeeping of my property. Accordingly, I agree to hold harmless and release UNIBE-CCIP, and their respective agents and employees (including, but not limited to the faculty member in residence, program coordinators, and personnel of UNIBE from any liability whatsoever for injury, illness, death or loss or damage to property which may occur in connection with my participation in this program, and I agree not to make any claim or to commence any litigation or other proceeding against any of the foregoing.

15. **PERSONAL RESPONSIBILITY:** I understand that neither UNIBE-CCIP nor any of the official representatives, instructors, or travel arrangers will be supervising me at all times. I will have the opportunity and the right to independently leave the group periodically, subject to the requirements for participation in and attendance at classes and other activities that are a required as part of the Program. Therefore, I will be responsible for my own safety and cannot hold UNIBE-CCIP liable for any injuries to my person or property or any other losses as a result of my participation in the program.

***I read, understand and agree the Terms and Conditions Agreement of participation in the Costa Rican Cultural Immersion Program 2011.***

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**Print Name of Applicant**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

**PLEASE KEEP A COPY AS REFERENCE**