

i. Conditions of Participation

When you submit the Confirmation of Participation form you are agreeing to the following terms and conditions of studying abroad with the Autonomous University of Social Movements.

PERIOD OF ENROLLMENT

The period of enrollment for students begins the day of the first day of classes and concludes the day of the last day of classes. These dates are published in the acceptance and orientation letters from Autonomous University of Social Movements (AUSM) program staff.

FEES

Fees include tuition and texts. Fees have been established based on all known circumstances at the time of calculation, and no change in them is expected.

PAYMENT

A \$200 deposit, credited towards the participant's program fee, must be received before a space on a program can be confirmed. The deposit is nonrefundable and may not be transferred to another semester. Payment of the balance of the program fee is due on May 15th. If payment is not made by the deadline, an additional \$200 is added to the student's tuition. If full payment is not received by the program start date, an additional \$500 is added to the student's tuition. Exceptions will be made for financial aid payments issued by the student's home institution upon receipt of a completed Financial Aid Information Sheet. However, if financial aid payments from the student's home institution do not cover all tuition and fees costs, the student will be responsible for paying the remainder in accordance with the aforementioned deadlines and consequent fees. Transcripts and diplomas will not be issued until students have paid all outstanding balances.

WITHDRAWAL REFUND PROCEDURES

No refunds are available after the day preceding the first day of classes. The \$200 deposit is not refundable under any circumstance. Requests for refunds must in writing before the first day of classes.

PARTICIPATION

Students are required to participate fully in all program components and are not allowed to withdraw from any one of the program components.

ii. Release and Indemnification Agreement

I, the undersigned, have agreed to participate in the Autonomous University of Social Movements' Study Abroad program (identified below as the "program"). In consideration of the Autonomous University of Social Movements' agreement to permit me to participate in the program, the receipt and sufficiency of which is hereby acknowledged, I hereby agree as follows:

1. I understand that my participation is wholly voluntary. I certify that I am 18 years of age or older.
2. This Agreement and the Conditions of Participation represent the complete understanding with Autonomous University of Social Movements concerning AUSM's responsibility and liability for my participation in the Program. This Agreement and the Conditions of Participation supersede any previous or contemporaneous understandings with the Autonomous University of Social Movements, whether written or oral, and cannot be changed or amended except in writing and signed by an authorized officer or agent of the Autonomous University of Social Movements. Should any provision or aspect of this Agreement or the Conditions of Participation be found unenforceable, all remaining provisions of the Agreement or the Conditions of Participation will remain in full force and effect. Should there be any dispute concerning my participation in the Program that would require the adjudication of a court of law, such dispute or lawsuit must be filed only in a court in Chicago or in the United States District Court for the District of Illinois, to the exclusion of any other court or jurisdiction. This Agreement and the Conditions of Participation shall be governed by the laws of the State of Illinois (without regard to its conflicts of laws rules).
3. I have shared the above information with those other parties responsible for payment or with related interest and understand that, before signing this Agreement, I have the right to consult with the advisor, counselor, or attorney of my choice.

Confirmation of Participation

Participant Name: _____

Program Semester/Year: _____

By signing this document, I confirm that I have read and agree to the Conditions of Participation (page 1) and Release and Indemnification Agreement (page 2) for the AUSM Study Abroad program indicated above.

X _____ (signature) _____ (date)

Deposit and Payment

Upon reading and completing this form, please do one of the following:

___ Send us this page as a .pdf and

___ make your \$200 deposit at www.ausm.community/payment **OR**

___ send a \$200 check to the Autonomous University of Social Movements to 3460 W. Lawrence Ave Chicago, IL 60625 **OR**

___ confirm that your deposit is waived by your institution: _____

Invoice Information

Tell us who we should bill for the remaining balance of the AUSM Study Abroad program fee

Name and/or Institution _____
(Prior approval must be obtained in order to bill your institution)

Address _____

City, state, zip _____

Telephone _____

Email address _____

Please make a copy of this agreement and keep with your records.