

PART B - PROGRAM AND COURSE PRE-REGISTRATION

Program: Nanjing Code: NAN/4

All students are required to enroll in the *Introduction to Chinese Cultural Studies* course and ONE *Mandarin Language* course.

Please select the course you believe best fits your current skill level below.

Please note: a language placement test will be required when you arrive in Nanjing to confirm placement.

LANGUAGE COURSES

- Mandarin Chinese for Beginners**
Chinese 101 (3)
- Mandarin Chinese Lower Intermediate Level**
Chinese 201 (3)
- Mandarin Chinese Advanced Level**
Chinese 301 (3)

CULTURAL STUDIES

- Introduction to Chinese Cultural Studies**
History/Sociology 103 (3)

Previous language studied	Level	Years of study
_____	_____	_____

PART C -TRANSPORTATION

PLEASE CHECK ONE:

AIFS TRANSPORTATION PACKAGE

I would like to fly with the AIFS Summer Advantage-booked flight on the dates indicated for my program as listed in the brochure. I have selected to depart from the following city:

Please note: on the line below, please write the name of your preferred U.S. departure city as listed in the AIFS brochure.

Name(s) of the participant(s) with whom you would like to fly.
Please note: must be flying from same U.S. departure city as you; this request is not guaranteed.

I WILL PROVIDE MY OWN TRANSPORTATION

Please note: This option is not recommended for the Nanjing program due to the extensive travel itinerary at the beginning and end of the program. Own transportation students will be unable to participate in the San Francisco stopover.

OPTIONAL "MEET AND GREET" SERVICE

This service is available for students who are not taking advantage of the AIFS Transportation Package, but wish to have an AIFS representative meet them at the airport for transfer to their destination.

Program	Arrival City	Fee
<input type="checkbox"/> Nanjing	Beijing	\$100

PART D - TRANSCRIPT

I authorize the overseas university to send my official transcript to my home school upon the completion of the program.

Student signature: _____

Registrar's name: _____

Send transcript to: Dept./school name: _____

School address: _____
City

State Zip Country

If this section is not completed, an official transcript will not be sent to your home institution. You may request a copy of your official transcript from AIFS in the future.

PART E - HOUSING AND MEDICAL INFORMATION

Please note that specific housing requests cannot be guaranteed and that single rooms are few, not always available and generally reserved for those with special needs.

Do you have a special diet, e.g., vegetarian or allergies to certain foods?

Yes No If yes, please specify: _____

Do you have allergies or chronic ailments of which our Resident Director should be aware?

Yes No If yes, please describe: _____

Are you receiving medication or any other treatment for any physical or mental condition?

Yes No If yes, please specify: _____

Do you have any special needs which would make it difficult for you to climb stairs or walk long distances?

Yes No If yes, please specify: _____

Roommate preference if known: 1. _____ 2. _____

Do you smoke? Yes No **Do you object to rooming with a smoker?** Yes No

Are you allergic to house pets? Yes No

What time do you get up in the morning? _____ **What time do you normally go to bed?** _____

Do you consider yourself a quiet person? Yes No **Where do you prefer to study?** Room Library Elsewhere

What type of music do you prefer? _____

Do you normally listen to music in your room? Yes No **If yes, what kind?** _____

Are there any hobbies or interests that you would like to pursue while abroad? Yes No

If yes, please specify: _____

Have you ever been convicted of a criminal offense? Yes No

If yes, please provide complete details (attach an additional sheet if necessary): _____

PART F - PAYMENT OPTIONS

To reserve a space on the program \$395 is due with the application (\$95 non-refundable application fee + \$300 deposit.) The \$300 deposit is refunded only if your application cannot be accepted. Students should apply by March 31, 2010. Students who apply after April 15, 2010 are subject to a \$200 late fee. The balance of the program fee is due on or before April 30, 2010. Please inform the AIFS staff in writing of any change of address.

Check

Please charge my credit card for \$ _____ Visa American Express Mastercard

Card number: _____

Expires: _____ Date: _____

Signature of cardholder: _____

Cardholder's name (please print): _____

*Checks should be made payable to **American Institute For Foreign Study.**
Please read and sign the release and agreement on the next page.*

PART G - PHOTOS

Please attach two recent passport photographs with your name and program on the back of each. These are needed for identification purposes overseas. If you do not have them available at this time, do not delay in submitting your application. However, please forward the photos as soon as possible and no later than May 1, 2010, to:

**Photos, AIFS Summer Advantage,
River Plaza, 9 West Broad Street, Stamford, CT 06902-3788**

PART H - AGREEMENT & RELEASE

Students and parent/guardian are asked to sign the application agreeing that this will comprise the agreement between AIFS Summer Advantage and its students and parents.

1. I, the undersigned (and my parents or guardian if I am a minor), an applicant for a program of the American Institute For Foreign Study®, Inc. ("the Institute"), acknowledge that I have read and accept the terms and conditions set forth in the AIFS Academic Year, Summer, Richmond and Summer Advantage academic brochures, which are incorporated in this agreement. This agreement is a legally binding contract. I unconditionally release the Institute from any claims for damage, injury, loss, or expense of any nature resulting from events beyond its control, including without limitation acts of God, war, strikes, crime, terrorism, sickness or quarantine, government restrictions or regulations. This release also applies to any losses arising from the use of any vehicle or from the selection of, or from any act or omission by, any host family, bus or car rental agency, steamship, airline, railroad, taxi or tour service, hotel service, hotel restaurant, school, university or other firm, agency, company or individual, unless the loss is caused by the gross negligence of the Institute.
2. I understand that I am responsible for exercising caution and common sense at all times to avoid injuries, and that the Institute cannot provide supervision or support during periods of independent travel.
3. I agree that if I become ill or incapacitated, the Institute may take such actions as it considers necessary under the circumstances, including securing medical treatment for me and transporting me to the United States. I release the Institute from any liability relating to this medical care. I also authorize the Institute to take whatever action it deems to be necessary and in my best interest (including transporting me out of the host country or back to the United States, at my own, or my parents' expense) in the event of political unrest or any other unforeseen event or condition. If the Institute incurs any expense on my behalf that is not covered by insurance, I (and my parents) agree to make immediate repayment upon my return.
4. I will comply with the Institute's rules, standards and instructions, and understand that failure to do so may result in being sent home at my (or my parents') expense, with no refund. I understand that my participation may be terminated if I am expelled from school or otherwise disciplined by school or civil authorities, or if the Institute, in its sole discretion, determines that my conduct is incompatible with the interests, harmony, comfort or welfare of other students. I (and my parents) agree to indemnify the Institute if I do anything that causes the Institute to sustain financial loss or liability
5. I understand that the Institute provides insurance coverage for my benefit while in the program, including limited health, accident, accidental death, baggage and tuition refund insurance. I acknowledge that it is my responsibility to understand the limitations of this coverage and agree that the Institute is not responsible for any uninsured losses.
6. I understand that future Institute publicity material may include statements made by participants or their photographs, and I consent to such use of my comments or photographs of me.
7. I understand that the Institute reserves the right to make changes, cancellations, or substitutions in cases of emergency or changed conditions, emergency or based upon the interest of the group. I understand that, if I leave the program, there will be no refund of tuition fees.
8. I understand that obtaining a passport and any other required travel documents is my sole responsibility.
9. If I am an adult, I understand that my traveling companions will be students. I also understand that I may be staying at student residences rather than hotels. I understand that AIFS is unable to guarantee single rooms or rooms with private baths or showers.
10. If I am not a citizen of the United States, I understand and accept that it is my responsibility to obtain all visas and required documents as a result of my not being a United States citizen in order to enter all the countries on my itinerary and participate in the AIFS program. Further, (whether I am a U.S. citizen or not) I shall hold the Institute harmless in the event I cannot obtain the necessary documents for participation in the program
11. I understand that the inability to obtain these visas and other documents does not constitute grounds for withdrawal with refund.
12. This agreement will be effective when my application is accepted by the Institute and shall be governed by the laws of the State of Connecticut.
13. This agreement cannot be modified except in writing by the Institute.
14. I agree that any dispute with the Institute that is not settled informally will be submitted to binding arbitration, to be conducted in substantial accordance with the rules of the American Arbitration Association. The location of the arbitration and identity of the arbitrator will be decided by mutual agreement, with the costs to be shared equally between the parties, and the decision of the arbitrator shall be final. By signing this agreement, I understand that I am giving up my right to have any claim against the Institute decided in Court before a judge or jury.
15. References in this agreement to "the Institute" shall include the American Institute For Foreign Study, Inc., and all of its agents, employees, affiliated companies, campus directors, chaperones, group leaders, teachers, host school and school officials. All references to "parents" of the applicant shall include the legal guardian or other adult who is responsible for the applicant.

Applicant's signature:

Date: _____

All applicants under 18 years of age must have this section completed.

I am the parent or legal guardian of the above (minor) applicant. I have read the brochure and foregoing Agreement and Release, and agree to be bound thereby:

Parent or guardian's signature:

Date: _____