

REQUEST FOR AN INTERNATIONAL INDEPENDENT STUDY COLUMBUS STATE UNIVERSITY

Students interested in conducting research abroad as part of an Independent Study CSU class must be approved in advance. **All requests are due at the Center for International Education four months before the start of the semester during which the proposed international independent study will be offered.** Students not approved for an international independent study will not be eligible for study abroad grants and scholarships.

A proposal for an international Independent Study MUST address the following:

1. The student's explanation of the independent study:
 - a. Description of the academic project and its role within the academic program;
 - b. Schedule for research, activities and excursions while conducting the international research;
 - c. Description of all affiliations or contacts in-country;
 - d. Plans for international and local travel/transportation and for in-country accommodation;
 - e. Projected costs including airfare(s), housing, local transportation, and class-based research or materials;
 - f. U.S. Department of State country information for all countries where course work will be conducted (http://travel.state.gov/travel/travel_1744.html);
 - g. U.S. National Center for Disease Control advice for U.S. visitors to each country where course work will be conducted (<http://wwwnc.cdc.gov/travel/destinations/list>); and
 - h. Completed and signed waiver of liability.
2. The faculty member or instructor of record's explanation and documentation:
 - a. Letter of recommendation from the faculty member explaining how the student's project will further the student's academic and career plans;
 - b. Draft syllabus with schedule of meetings before, during and after the international work;
 - c. Totals of contact hours (in person, virtually, etc.);
 - d. Methods for student evaluation (if not included in the syllabus); and
 - e. Amount and source of faculty compensation.

Those signing below indicate that they have reviewed the proposal with documentation and support offering the proposed Independent Study class with an international component.

Faculty Member (Instructor of Record)

Date

Department Chair

Date

Dean of College

Date

Director, Center for International Education

Date

If the proposal is approved, the Independent Study CRN must be created by the Center for International Education in consultation with the instructor of record and academic department.

Students approved for an independent study with an international component are required to complete the following after approval and at least two months before departure:

1. Purchase the study abroad comprehensive insurance carried by Columbus State University and available through the Center for International Education.
2. Participate in a mandatory study abroad orientation for outgoing students. Check with the Center for International Education on the appropriate orientation date.
3. Complete a Participate Information Form (PIF).
4. Provide a copy of the passport information page and copies of any relevant visas or permits.
5. Provide in-country emergency contact information (phone, email, address) for each location where the student will be housed while conducting course work.

Failure to complete all of the steps above will lead to loss of study abroad grants and scholarships as well as removal from the relevant study abroad class.

International Independent Study Agreement and Waiver Form Columbus State University

I, _____, a participant in independent study and/or internship
(full name)

in _____, hereby agree as follows: I have chosen to engage in
(city, country)

in a project involving _____

_____ (description of activities)

during _____ from _____ to _____
(semester and year) (start date) (end date)

as an independent study and/or internship activity with Columbus State University, for academic

credit in _____, assessed by
(course number and title)

(name of CSU faculty member as instructor of record)

I acknowledge that I am traveling and working independently and will not be accompanied or supervised by any CSU faculty or staff.

I have thoroughly researched this international activity and chosen it freely, independently, and with careful consideration. I acknowledge that the Board of Regents of the University System of Georgia and its agents and employees assume no responsibilities for my safety or any liability for costs or difficulties that I may incur related to the activities I pursue while abroad and that I participate in these activities at my own risk.

In exchange for the opportunity to earn Columbus State University credit for this activity I hereby release and forever discharge Columbus State University, the Board of Regents of the University System of Georgia, their members individually and their officers, agents and employees from any and all claims, demands, rights, expenses, actions, and causes of action, of whatever kind, arising from or by reason of any personal injury, bodily injury, property damage, or the consequences thereof, whether foreseeable or not, resulting from or in any way connected with this activity.

I further covenant and agree that for the consideration stated above, I will hold forever harmless and will not take legal action against Columbus State University, the Board of Regents of the University System of Georgia, its members individually, and their officers, agents, and employees for any claim for damages arising or growing out of my participation whether caused by negligence or otherwise.

I certify that I am at least 18 years of age, or, if not, that I have secured below the signature of my parent or legal guardian as well as my own. This consent is given freely and voluntarily by me without coercion, duress, threat or promise of any kind. I certify that I understand and have read the above carefully before signing. I understand that if I do not sign, I will not be able to participate in the above-named international activity, but will not be subject to any other adverse action.

Signature of Student

Date

Signature of Parent (if student is under 18)

Date

**Please submit agreement/waiver form to the
Center for International Education
4225 University Avenue
Columbus, Georgia 30907
706-565-4036**

HOST COUNTRY EMERGENCY CONTACTS FOR AN INTERNATIONAL INDEPENDENT STUDY

Student's Last Name

Student's First Name

Student's CSU ID Number

Dates of Travel

CSU Course Number and Title (e.g. ARTH 3555: Selected Topics in Art History or THEA 4899: Independent Study in Theatre)

Research Project Title

Name of CSU Faculty Member as Instructor of Record

Emergency contacts in the host country

For each city where you will be working, provide the information for at least one person with whom you will either be lodging or working closely. This should be someone to whom you can turn for help and also someone who can assist us if we cannot get in touch with you.

City and Country Location #1 _____
Name _____
Address _____
Telephone _____
Email _____

City and Country Location #2 _____
Name _____
Address _____
Telephone _____
Email _____

City and Country Location #2 _____
Name _____
Address _____
Telephone _____
Email _____

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