



# The University of **Montana**

## National Student Exchange Application 2012-2013

**Deadline to exchange during the 2012-2013 school year is  
Monday, February 13, 2012**

### **Prior to completing this application:**

- **Read NSE eligibility requirements, policies, and procedures (pgs 10-29 of the NSE Directory, available at <http://nse.org>)**
- **Attend a NSE informational meeting at The University of Montana**

### **Application Checklist:**

- **Completed NSE Application**
- **Current unofficial transcript**
- **One page, typed essay answering the question “Where do you want to go on exchange and why?”**
- **\$175 nonrefundable application fee (check made payable to The University of Montana, credit card, or cash)**

**Call or email to schedule an appointment to drop off your completed application:**

Kevin Molm  
NSE Coordinator  
406-243-2071 or [kevin.molm@mso.umt.edu](mailto:kevin.molm@mso.umt.edu)

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## CONTACT INFORMATION

Name: First \_\_\_\_\_ M.I. \_\_\_\_\_ Last \_\_\_\_\_

### Current Address:

Street/Residence Hall and Room \_\_\_\_\_

City, State/Province, and Zip/Postal Code \_\_\_\_\_

### Permanent Address:

Street Address \_\_\_\_\_

City, State/Province, and Zip/Postal Code \_\_\_\_\_

Current Phone \_\_\_\_ / \_\_\_\_ ext \_\_\_\_ Permanent Phone \_\_\_\_ / \_\_\_\_

Alternate Phone/Cell Phone \_\_\_\_ / \_\_\_\_

Email \_\_\_\_\_

Alternate Email \_\_\_\_\_

Student ID Number \_\_\_\_\_

## DEMOGRAPHIC INFORMATION

Date of Birth (MM/DD/YYYY): \_\_\_\_\_ Gender Female Male

Are you currently living in on-campus housing? Yes No

Are you a resident of the state/province in which your home campus is located? Yes No

Country of Citizenship: \_\_\_\_\_

Primary reason(s) for exchange—check all applicable

- |   |   |
|---|---|
| <input type="checkbox"/> Access to different courses/faculty              | <input type="checkbox"/> Enter host campus honors program |
| <input type="checkbox"/> Evaluate Graduate Schools                        | <input type="checkbox"/> Exchange as a resident assistant |
| <input type="checkbox"/> Live in a different area                         | <input type="checkbox"/> Language study                   |
| <input type="checkbox"/> Personal Growth                                  | <input type="checkbox"/> Look for future employment       |
| <input type="checkbox"/> Participate in host campus international program | <input type="checkbox"/> Other: _____                     |

## SCHOLASTIC AND OTHER INFORMATION

Current Class Level: Fr So Jr Sr Current Cumulative GPA \_\_\_\_\_

Class Level while on exchange: Fr So Jr Sr

Major \_\_\_\_\_

Minor \_\_\_\_\_

Will you need courses in your major while on exchange?  Yes  No (if Yes, make sure there are no limitations that will effect you or that your major is not a closed program—see NSE catalog)

Are you requesting financial aid (Plan A) from the host campus?  Yes  No

Are you currently receiving financial aid from The University of Montana?  Yes  No

Where do you plan to reside at your host school?  Residence Hall  Sorority/Fraternity  Off campus

Are you currently enrolled in the honors program?  Yes  No

Marital Status:  Single  Married

Will you be accompanied on exchange by: spouse  Yes  No children  Yes  No

Do you wish to go on exchange with another student(s):  Yes  No

If yes, name of the student(s) \_\_\_\_\_

Name of campus at which the student is enrolled: \_\_\_\_\_

### EXCHANGE REQUESTS

Period of requested exchange  Fall Semester 20\_\_\_\_  Spring Semester 20\_\_\_\_  
 Fall Quarter 20\_\_\_\_  Winter Quarter 20\_\_\_\_  Spring Quarter 20\_\_\_\_  
 Summer 20\_\_\_\_

List in priority order the institutions you wish to attend and the tuition payment plan(s) you could use. (Use an additional sheet if more than five institutions are requested.)

| Name of Institution | Tuition Payment Plan<br>Plan A=In-state tuition/fees are paid to your host institution.<br>Plan B=You pay your normal tuition/fees to your home campus. | Housing<br>Please be sure to review housing policies for each school. Some schools do require you to live on campus or do not provide on campus housing. (check only one per school) |
|---------------------|---|--|
| 1. _____            | ___ A only ___ B only ___ A or B (prefer ___)   | ___ Need Housing ___ Prefer Housing ___ No Housing   |
| 2. _____            | ___ A only ___ B only ___ A or B (prefer ___)   | ___ Need Housing ___ Prefer Housing ___ No Housing   |
| 3. _____            | ___ A only ___ B only ___ A or B (prefer ___)   | ___ Need Housing ___ Prefer Housing ___ No Housing   |
| 4. _____            | ___ A only ___ B only ___ A or B (prefer ___)   | ___ Need Housing ___ Prefer Housing ___ No Housing   |
| 5. _____            | ___ A only ___ B only ___ A or B (prefer ___)   | ___ Need Housing ___ Prefer Housing ___ No Housing   |

### EDUCATIONAL BACKGROUND

Number of credits completed to date: \_\_\_\_\_ Number of credits enrolled in current term: \_\_\_\_\_

Expected graduation date: \_\_\_\_\_

Do you have any incomplete grades, missing grades, or other deficiencies (e.g. failure to complete required proficiency tests)?  Yes  No

If yes, please explain: \_\_\_\_\_

Activities, positions, honors while in college: \_\_\_\_\_

## **SPECIAL NEEDS OR CIRCUMSTANCES**

If you have a physical condition for which accessible, on-campus housing or classroom accommodation might be needed; a documented disability which may require academic accommodation (e.g., notetakers, taped texts); a medical condition which might require immediate attention during exchange; or a condition which might affect emotional or mental well-being during exchange, you are encouraged to identify your needs by attaching a separate page indicating the nature and extent of your circumstances and arrangements which are currently being made for you on this campus. Also indicate whether or not we may contact your requested host campuses at this time. NSE does not discriminate on the basis of special needs. Rather, your disclosure at this stage of the application process is invited in order to assist you in identifying a placement site which can provide reasonable accommodation of your needs. Following placement, it is your responsibility to consult the host campus coordinator and ADA officer to determine the deadlines by which you must submit written, current, and professionally documented information as required by your host campus.

## **OTHER CONSIDERATIONS**

Have you ever been convicted of a felony?  Yes  No

Are you on probation, parole, or have any legal judgments pending against you either inside or outside campus?

Yes  No If yes, please explain:

Are you currently under any campus disciplinary action for violation of codes of academic or student conduct?

Yes  No If yes, please explain:

Do you have any outstanding indebtedness to the campus?  Yes  No

## **LANGUAGE PROFICIENCY**

What is your native language?  English  French  Spanish  Other:

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If you plan to exchange to a campus in Puerto Rico, you must be certified for proficiency in Spanish. If you plan to exchange to the Universite de Sherbrooke in Quebec, you must be certified for proficiency in French. If English is not your first language, for all other NSE locations you must demonstrate proficiency in English. Language proficiency must be determined prior to placement.

## EMERGENCY CONTACT

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Street \_\_\_\_\_

City, State/Province, and Zip/Postal Code

\_\_\_\_\_  
Phone \_\_\_\_\_ / \_\_\_\_\_

E-mail \_\_\_\_\_

### RELEASE OF INFORMATION

The collection, retention, and dissemination of your records and information about you are subject to federal regulation under the Family Education Rights and Privacy Act of 1974. You are responsible for specifying the persons or agents who have access to your records. Therefore, it is necessary that we obtain your permission to request and release information pertinent to your exchange. Please read the following statements and sign below:

I understand that it will be necessary for my campus to obtain certain information about my academic and non-academic record in order to: 1) ascertain my eligibility and suitability for an exchange through NSE, and 2) facilitate my exchange after it is arranged. I hereby grant permission to the NSE coordinator and/or designee to obtain information that is appropriate to my application and participation in the exchange including, but not limited to, permanent academic records and transcripts, conduct, fiscal records, medical records, all for the purposes of exchange placement and participation, continuation, or termination.

I give permission to the NSE coordinator and/or designee to contact appropriate personnel in order to verify that I am under no disciplinary action for violation of codes of academic and student conduct and/or that I have no judicial cases pending which would invalidate my eligibility for exchange.

I hereby release information contained in my application, transcripts, and other information required as part of the NSE application process to my home NSE Coordinator, designee, and those individuals/committees responsible for reviewing and approving my application for exchange participation.

I hereby release information contained in my application, transcripts, and other information required as part of the NSE application process to the National Student Exchange Central Office and to the NSE host institution at which I am placed.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## **SIGNATURE**

I have read and fully understand:

1. information on eligibility, policy, and procedures presented in the NSE Directory (pages 3-21)
2. campus policies and procedures governing my exchange participation

I further understand that:

- participating in the National Student Exchange is a privilege and not a right
- submitting an application is not a guarantee of application acceptance or placement
- failure to maintain (prior to and during my exchange) all of the eligibility requirements of the program and those of my home and host campuses will result in the cancellation of my exchange.
- failure to pay all financial obligations to my home and host campuses will result in the cancellation of my exchange.

I also understand that until financial obligations are met, my home and host campuses will not release transcripts; and I will not be permitted to re-enroll at, or graduate from, my home campus.

If accepted for participation in the National Student Exchange, I agree to adhere to all the rules and regulations of both my home and host institutions. Failure to do so will result in the cancellation of my exchange.

I affirm that all information is complete, accurate, and true to the best of my knowledge. I acknowledge that I am signing freely, voluntarily, and under no compulsion.

Signature \_\_\_\_\_

Date \_\_\_\_\_