

**California State University, Long Beach**  
**British Isles Program**  
**Summer 2008**



**Application Procedure**

1. Complete the AIFS application form, securing the signature of the faculty member who is leading the course (Professor Marka Burns, e-mail: [mhburns@csulb.edu](mailto:mhburns@csulb.edu)), and thus certifying your eligibility to apply.
2. Attach a photocopy of the information page of your passport (the page with your picture). If you do not yet have a passport, please apply for one immediately, and mail a copy once you have received it.
3. Take your deposit check for \$450 payable to "CSULB" to University College and Extension Services (UCES) FND-104, California State University, Long Beach, 1250 Bellflower Blvd., Long Beach, CA 90840, by Monday, April 21, 2008. (Please see Agreement & Release form for the complete refund policy.)
4. The balance of fees should be sent before the dates indicated directly to: American Institute For Foreign Study, Partnership Programs, College Division, River Plaza, 9 West Broad Street, Stamford, CT 06902-3788. Telephone: (800) 727-AIFS.

**The AIFS program fee is \$3,665 and includes the following (based on a minimum enrollment of 15-19 participants):**

**In Edinburgh** (July 14-18)

- ⇒ four nights accommodation in twin-/triple-bedded rooms in a tourist-class hotel on a bed-and-breakfast basis;
- ⇒ guided half-day walking tour of Edinburgh including entrance to Edinburgh Castle;
- ⇒ group welcome meal;
- ⇒ guided tours of the Scottish National Gallery of Modern Art and the National Gallery of Scotland;
- ⇒ a theater, music or dance performance;
- ⇒ full-day guided excursion to Glasgow by private coach with visits to the Glasgow School of Art including the Charles Rennie Mackintosh Buildings, the Gallery for Contemporary Art and the National Piping Centre (Museum of Bagpiping);
- ⇒ full-day excursion to the Scottish Highlands;
- ⇒ coach transfer to Waverley Station for train transfer to London. Includes second-class train tickets.

**In London** (July 18-August 2)

- ⇒ coach transfer from King's Cross Station to the AIFS Student Center for a brief orientation and tour followed by transfers to your accommodation;
- ⇒ accommodation in shared homestays with breakfast provided Monday-Friday and access to the kitchen for preparation of light meals on the weekends;
- ⇒ a London Transport travel pass valid for the inner 2 zones of the London Transport system giving unlimited use of the buses and underground trains for the duration of the program;
- ⇒ half-day guided sightseeing tour of London by private coach and a ticket for a ride on the London Eye;
- ⇒ theater performance at Shakespeare's Globe theater and backstage tour;
- ⇒ theater performances at the Royal National Theatre and a London West End theater;
- ⇒ classical ballet performance at the Royal Opera House (or similar);
- ⇒ tickets to 2 musical concerts;
- ⇒ visit to a Tate museum;
- ⇒ half-day guided tour of the Institute of Contemporary Art and the National Gallery;
- ⇒ full-day trip to Stratford-Upon-Avon by private bus including entrance to Shakespeare's Birthplace and Anne Hathaway's Cottage;
- ⇒ use of the wireless-enabled AIFS Student Center and access to AIFS Student Services staff in London;
- ⇒ use of the AIFS student computer facilities in London for e-mail, printing and Internet access;
- ⇒ medical and program fee refund insurance policies;
- ⇒ non-refundable \$50 application fee.

**Program fees do not include the following:**

- ⇒ optional transportation package including round-trip transatlantic airfare (Los Angeles-Edinburgh/London-Los Angeles), and round-trip transfers overseas between the airports and your program sites on the specified program date(s) at a cost of \$1,025\*;
- ⇒ mandatory additional U.S. government and airline-imposed departure taxes, fees and fuel surcharges of \$525 (subject to change)\*;
- ⇒ \$125 refundable damage deposit;
- ⇒ tuition fees to your university;
- ⇒ textbooks;
- ⇒ meals;
- ⇒ passport and visa fees if applicable;
- ⇒ additional field trips or excursions required by your instructors;
- ⇒ personal expenses such as laundry;
- ⇒ optional personal effects coverage and medical insurance upgrade.

**\* AIFS offers round-trip transportation from Los Angeles to Edinburgh and London to Los Angeles, including overseas transfers between the airports and your program sites, at a cost of \$1,025 excluding mandatory U.S. government and airline-imposed departure taxes, fees and fuel surcharges of \$525 (subject to change) for which you will be billed separately. Please mark your application form if you wish to purchase the flight, and you will be billed accordingly. A minimum of 10 participants must take the flight for it to be offered.**

**Please retain this page for your records.**

## PAYMENT SCHEDULE FOR AIFS FEES

<u>Summer Program</u>	<u>Fee</u>	<u>Deadline</u>	<u>Optional</u>	<u>Fee</u>	<u>Deadline</u>
Enrollment Deposit	\$450.00	April 21, 2008	Airfare	\$1,025.00	May 23, 2008
Balance of Fees	<u>\$3,215.00</u>	May 23, 2008	Taxes/Fees (subject to change)	\$525.00	May 23, 2008
Sub-total	\$3,665.00		Medical Insurance Upgrade	\$65.00	May 23, 2008
Damage Deposit (Mandatory/ Refundable)	<u>\$125.00</u>	May 23, 2008	Personal Effects Coverage	\$90.00	May 23, 2008
Total	\$3,790.00	May 23, 2008			

Deposit check only should be made payable to "CSULB." All other payments should be made payable and sent directly to AIFS.

Please note: A \$35 returned check fee will be charged on all checks returned by the bank for insufficient funds.

## AIFS TRANSPORTATION PACKAGE

Participants have the option of purchasing a round-trip ticket for the flight arranged through AIFS. Participants choosing this option should note the following restrictions: Tickets purchased from AIFS are exclusively on scheduled airlines (not charters). They are not endorsable to another carrier. Flights are not necessarily direct or non-stop, they cannot be rerouted, and frequent flyer miles are not applicable. The AIFS Transportation Package includes round-trip ground transportation from the airports in Edinburgh and London to your accommodations on the regularly scheduled program dates. AIFS will book flights only on the dates indicated on this application.

Participants wishing to purchase the Transportation Package must notify AIFS in writing by Monday, April 21, 2008. Participants wishing to cancel from the flight must notify AIFS in writing by Friday, May 23, 2008. Cancellation penalties will apply. Tickets are non-refundable after this date.

**AIFS Airfare Regulations:** Return must be to original U.S. departure city. Tickets are subject to airline availability. No refunds are available for any unused portion of ticket. Stopovers are not permitted. Once overseas, participants may be able to change their return date, but only if that date is available and in the same class of service in which the ticket was booked. Only the ticketing agent can provide this information. Participants are subject to agency and airline-imposed change fees and space availability. Group round-trip ground transportation to and from the airports in Edinburgh and London is on the regular scheduled program dates only.

AIFS cannot guarantee that all passengers will be booked on the same flight.

***AIFS will not make your flight arrangements for you unless you clearly indicate your travel preferences on your application.***

**A minimum of 10 participants must take the AIFS flight for it to be offered.**

## PROGRAM DATES

### Summer 2008

Sunday, July 13, 2008	AIFS flight departs U.S. for Edinburgh, Scotland.
Monday, July 14, 2008	Arrive in Edinburgh. Transfer to your accommodations.
Friday, July 18, 2008	Transfer to London.
Saturday, August 2, 2008	Program ends. AIFS flight departs London for the U.S.



## PART E – HEALTH AND HOUSING INFORMATION

Please complete the following questionnaire carefully. Your housing assignment will be made based on the information that you provide. All requests are taken into consideration.

Name \_\_\_\_\_ School \_\_\_\_\_ Term \_\_\_\_\_

### SHARED HOTEL (Edinburgh)

**Please note that specific housing preferences cannot be guaranteed.**

**Please note that single rooms are very limited and are allocated according to special needs, e.g. medical, age-related**

Do you smoke?  Yes  No Do you object to a roommate who smokes?  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  
Are you receiving any special medical treatment?  Yes  No If yes, specify: \_\_\_\_\_  
Do you have any physical condition that prevents you from climbing stairs? If yes, specify: \_\_\_\_\_  
Roommate preference (if known) (1) \_\_\_\_\_ (2) \_\_\_\_\_  
Do you have any special reason for requesting a single room? If so, please specify: \_\_\_\_\_  
Do you like to cook your own meals?  often  occasionally  never  
What type of music do you prefer? \_\_\_\_\_ Do you normally listen to music in your room?  Yes  No  
Are there any hobbies or interests you would like to pursue while in the UK? \_\_\_\_\_

### SHARED HOMESTAY (London)

**Please complete the following questions to assist the AIFS staff in finding a suitable host family for you.**

Father's name \_\_\_\_\_ Occupation \_\_\_\_\_  
Mother's name \_\_\_\_\_ Occupation \_\_\_\_\_  
Ages of brothers and sisters \_\_\_\_\_  
Major \_\_\_\_\_ Year \_\_\_\_\_  
Jobs done in the past \_\_\_\_\_  
Do you smoke?  Yes  No Do you object to a roommate who smokes?  Yes  No  
Would members of the host family who smoke elsewhere in the house/apartment bother you?  Yes  No  
Roommate preference (if known) (1) \_\_\_\_\_ (2) \_\_\_\_\_  
Would you prefer to live in a household with children or without?  With  Without  
Would you object to being placed with a single-person host?  Yes  No  
Do you have any allergies to household pets?  Yes  No  
If there are any more details about yourself that you think would help your host to get to know you better, please state below:  
\_\_\_\_\_  
\_\_\_\_\_

## PART F – ADDITIONAL INFORMATION

Studying in another country requires considerable adaptability. This is part of both the challenge and the reward. Your willingness to answer these questions will assist the AIFS staff in providing you with a housing situation that is most likely to meet your needs. Please note that specific requests cannot be guaranteed.

Do you have any special dietary needs? \* If yes, please describe \_\_\_\_\_  
Do you consider yourself a conservative or liberal person?  Conservative  Liberal  
Do you have any allergies or chronic ailments?  Yes  No If yes, please describe \_\_\_\_\_  
\_\_\_\_\_  
Are you presently under treatment for any mental or emotional matters?  Yes  No If yes, please describe \_\_\_\_\_  
\_\_\_\_\_  
Are you presently taking any prescription medication on a regular basis?  Yes  No If yes, please list and state purpose \_\_\_\_\_  
\_\_\_\_\_

Studying abroad requires a great deal of physical mobility. Do you feel you are able to perform the essential functions of studying abroad with or without any special requirements? \* If you do have special requirements, describe the requirement you would need and how this would enable you to participate.  
\_\_\_\_\_  
\_\_\_\_\_

*\*AIFS cannot guarantee to accommodate special requirements and requests.*

# Agreement and Release Form

I, the undersigned, (and my parents or guardian if I am a minor), an Applicant for an overseas study 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 application/brochure, which are incorporated in this agreement. This agreement is a legally binding contract. I acknowledge and accept the terms of the refund policy as outlined below:

If a participant withdraws in writing

On or before May 23, 2008

After May 23, 2008, but on or before July 2, 2008

After July 2, 2008

She/he receives

All fees paid less \$250 plus any non-refundable deposits paid either by the student or by AIFS on the student's behalf.

All fees paid less \$450 plus any non-refundable deposits paid either by the student or by AIFS on the student's behalf.

No refund, and student is responsible for entire program fee.

All requests for refund must be made in writing, signed, and addressed or faxed to: **Registrar, AIFS, Partnership Programs, College Division, River Plaza, 9 West Broad Street, Stamford, CT 06902; fax number (203) 399-5597. Unsigned withdrawal statements will not be processed.**

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/organizer, hotel service, hotel, restaurant, school, university/college, or other firm, agency, company or individual, unless the loss is caused by the gross negligence of the Institute.

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.

I agree that if I become ill or incapacitated, the Institute or its emergency assistance company 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 on my behalf any costs not covered by its general liability insurance, I (and my parents) agree to make immediate repayment upon my return.

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 the 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.

I understand that the Institute provides insurance coverage for my benefit while in the program, including limited health, accident, accidental death, personal effects 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.

I understand that the Institute reserves the right to make changes, cancellations or substitutions in cases of changed conditions or emergency, or based upon the interest of the group. I understand if I am terminated from the program, there will be no refund of AIFS fees.

I understand that obtaining a passport and any other required travel documents is my sole responsibility, and I agree to hold the Institute harmless in the event that I am unable to obtain the necessary documents for participation in the program and to indemnify the Institute for any costs to it that result from my failure to obtain the required documentation.

I understand that if I am not a U.S. citizen, a visa may be required for entry to the countries I plan to visit while a participant on this program. I further understand that it is my sole responsibility to determine my visa requirements and obtain the appropriate visa(s), and I agree to hold the Institute harmless in the event that I am unable to obtain the necessary documents and visas for participation in the program and to indemnify the Institute for any costs to it that result from my failure to obtain the required documentation.

I understand that from time to time the Institute's publicity material may include statements by its participants and/or their photographs, and I consent to such use of my comments and photographic likeness.

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. This agreement cannot be modified except in writing by the Institute.

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.

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, and authorized by law or court order to make legal decisions and to enter into binding contracts on behalf of the applicant.

If I am using financial aid to pay for all or part of my AIFS program fees, and if that aid is canceled or reduced by my institution or lending agency after I have embarked on the AIFS program, I am immediately responsible for full payment of all fees. Failure to make payment will result in my administrative withdrawal from the program.

Signature of Applicant

Date

I certify that I am the parent or legal guardian of the Applicant, and that I have read the foregoing Agreement and Release (including such parts as may subject me to personal financial responsibility), and hereby waive any claim that I might have against the Institute or its agents (as set forth above), both in my own behalf and in my capacity as legal representative of the Applicant, any claim arising from the Applicant's participation in the program.

Signature of Parent/Guardian if Applicant is under 18 years of age

Date

\*A special substitute paragraph is available to members of the Christian Science faith.