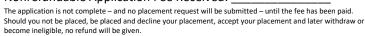


	February 18, 2022
Deadline for Priority Placement:	
·	

Date Application Submitted:	
Nonrefundable Application Fee Received:	





Admissions and Records Office 303 University Dr., Mangilao, Guam Phone: (671) 735-2201 Fax: (671)735-2203

Email: mslg@triton.uog.edu

Application for Exchange

Prior to completing this application, read:

- Pages 11-24 of the NSE Student Guide: Exchange Policies and Procedures or the section on Policies and Procedures at nse.org, Students
- Campus policies and procedures for NSE

Return This Form To:

Marlene Leon Guerrero

Phone: (671) 735-2201 Fax: (671)735-2203

٧	To be completed by the NSE Coordinator.
	CIP Code (Classification of Instructional Programs)
	Credential Level:02 Associate Degree03 Bachelor's Degree04 Post Bacc. Certificate)05 Master's Degree Program Length
	Program Length

mslg@triton.uog.edu			
noige atternational		√ = Placement Form Fig	elds
Contact Information			
Name: First	Middle	Last	
Current Address:			
Street/Residence Hall and Room			
City, State/Province, and Zip/Postal Code _			
Permanent Address:			
Street			
City, State/Province, and Zip/Postal Code _			
Cell Phone/		ne/	
Emergency Phone/	_		
Campus E-mail	Preferred/	Personal E-mail	
Campus I.D. Number			
Demographic Information			
Date of Birth (MM/DD/YYYY):	Go	ender Identity: 🗖 Female 📮 Male 📮 Other	
Are you currently living in on-campus housing? \Box Y	'es □ No		
Are you a resident of the state/province in which yo	ur home campus is lo	cated? ☐ Yes ☐ No	
Country of Citizenship: United States Canada	☐ Other		
lacksquare Non-resident alien — If non-resident alie			
Primary reason(s) for exchange - check all applicable access different courses/faculty evaluate graduate schools live in a different area personal growth participate in host campus international program enter host campus honors program exchange as a resident assistant language study look for future employment	☐ Hispanic ☐ Americar ☐ Asian, no ☐ Black, no ☐ Native Ha ☐ White, no ☐ Two or m ☐ Not repo	optional) or Latino, of any race Indian or Alaska Native, not Hispanic or Latino t Hispanic or Latino t Hispanic or Latino uwaiian or Other Pacific Islander, not Hispanic or Latino ot Hispanic or Latino ore races, not Hispanic or Latino rted (race or ethnicity unknown)	

Scholastic and Othe				
Current Class Level: Fr Summarized From From From From From From From From	ge at this campus: Minor: major while on exchange? nancial aid? Yes No id (Plan A) from the host cam onal benefits? Yes No the honors program? Yes uent (check all applicable)? En at the exchange school? Re Warried exchange by: spouse Yes ge with another student(s):	I Yes □ No pus? □ Yes □ No □ No glish □ French □ Spanish □ esidence hall □ Sorority/Fraterning □ No children □ Ye I No □ Yes: student's name	Other lity	-campus
Name of campus at v	which the student is enrolled:			
Exchange Request	ts			
Period of requested exchange	:	☐ Spring Semester 20		
		☐ Winter Quarter 20	☐ Sprin	g Quarter 20
	☐ Summer 20		·	
	☐ Summer 20utions you wish to attend and	the tuition payment plan(s) you copus regardless of which tuition pay Tuition Payment Plan Plan A: You pay resident (in-state/in-prov	ould use. yment plan	you select. I need classes in my major while on exchange
NOTE: Costs for room and me	☐ Summer 20utions you wish to attend and	pus regardless of which tuition pay Tuition Payment Plan	ould use. yment plan	I need classes in my
NOTE: Costs for room and me	☐ Summer 20 utions you wish to attend and als are paid to your host cam	pus regardless of which tuition pay Tuition Payment Plan Plan A: You pay resident (in-state/in-prov tuition/fees to your host campus. Plan B: You pay your normal tuition/fees	ould use. yment plan	I need classes in my
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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. Written documentation is usually due to the host campus two to three months prior to enrollment.

Other Considera	tions				
Have you ever been con	victed of a felony? Yes No				
Are you on probation, parole, or have any legal judgments pending against you either inside or outside campus? □ No □ Yes If yes, please explain:					
					Are you currently under
□ No □ Yes If yes, please explain:					
Do you have any outstar	nding indebtedness to the campus (tuition, fe	es, room, meals, library or	parking fines)?		
☐ No ☐ Yes	If yes, please explain:				
Language Profic	iency				
What is your native lang	uage? 🗖 English 🗖 French 🗖 Spanish 🗖	Other:			
French-speaking univers	to a campus in Puerto Rico, you must be certi ity in Canada, you must be certified for profic must demonstrate proficiency in English. Lar	ciency in French. If English is	s not your first language, fo	r all	
Recommendatio	ns/References				
	are writing references for you. Submit refere ho will recommend you for exchange.	nce forms to your advisor, a	t least one faculty/staff me	ember,	
advisor	department/office	phone	e-mail		
faculty/staff	department/office	phone	e-mail		
name	relationship to applicant	phone	e-mail		
Emergency Cont	act				
Identify a person who sh	ould be informed in case of an emergency at	your host NSE campus.			
Name	R	elationship			
Street					
City, State/Province, and	l Zip/Postal Code				
Land-line 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 (FERPA) 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, letters of recommendation, 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, I do not have any outstanding indebtedness to the campus, and/or that I have no judicial cases pending which would invalidate my eligibility for exchange.
- I hereby release information contained in my application, letters of recommendation, 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 give permission for the information contained in my application to be submitted on NSE's restricted, Web-based
 placement site for the use of the home and host campuses and the NSE Central Office in placement and record-keeping
 processes.
- I hereby release information contained in my application, letters of recommendation, transcripts, and other information required as part of the NSE application process to the NSE Central Office and to the NSE host institution at which I am placed.

Signature	Date
Signature	Date

Supporting Materials or Other Requirements

- unofficial transcript
- recommendations/references
- program of study statement
- statement of personal goals and reasons for exchange participation
- language proficiency report (if applicable)
- interview

Signature

I have read and fully understand:

- information on pages 11-24 of the NSE Student Guide: Exchange Policies and Procedures or the section on Policies and Procedures at nse.org, Students
- 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 maintain a cumulative 2.5 gpa as well as have a 2.5 gpa in the term prior to my exchange 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.
- 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.
- my exchange is not completed until I submit to my home campus a transcript of my host campus work.

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, accu	ate, and true to the best of m	ıy knowledge. I acknowledge that I	am signing freely,
voluntarily, and under no compulsion.			

Signature	Date
9	