

# Summer 2008

## University of Salamanca In Residence Program in Language and Culture

### Application Form

Return to:  
Dr. Alberto Ferreiro  
Seattle Pacific University  
Department of History  
Seattle, WA 98119

All information must be supplied and completed by the applicant except where otherwise indicate. Applications are complete when the following information has been received:

- Completed application form with deposit
- Two passport-size photographs
- Official transcript** of applicant's college grades
- Two** letters of reference from professors only, and one **outside** your major.

### SECTION 1 (To be completed by the applicant) Summer Session 2008

Name: \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
(please print) Last First Middle

Birth date: \_\_\_\_\_ Citizenship \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Month Day Year

Name of Parent or Legal Guardian: \_\_\_\_\_  
Last First Middle

Home Address: \_\_\_\_\_  
street number city state ZIP code

Phone Number: ( ) \_\_\_\_\_

Present Mailing Address: \_\_\_\_\_  
street number city state ZIP code

Phone Number: ( ) \_\_\_\_\_

College or University Address: \_\_\_\_\_  
street number city state ZIP code

Major: \_\_\_\_\_ G.P.A. \_\_\_\_\_ Present status: \_\_\_\_\_  
e.g. Junior/Senior/Graduate

Statement of Purpose by the Applicant:

In the section below please write a brief autobiographical sketch and explain your reasons for wishing to study on this program. (Append an additional page if necessary.) In addition, I want you to also address the following areas.

1. What is your favorite type of music?
2. What artistic and artists styles do you like?
3. What hobbies do you have?
4. Who are your favorite authors?

To the best of my knowledge the information supplied by me on this form is complete and accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

NAME \_\_\_\_\_

TRAVEL: (ANSWER ALL QUESTIONS)

Will depart from Seattle \_\_\_

Will join you in Salamanca \_\_\_

Will stay in Europe longer \_\_\_

Will come back at the end of the Program \_\_\_

HOUSING:

I want a single room \_\_\_ (Limited) **NOTE: There is an extra \$110.00 charge for single rooms**

I want a double room \_\_\_

LANGUAGE COURSES \_\_\_

Will enroll at the beginning level \_\_\_

Will enroll at the intermediate level \_\_\_

Will enroll at the advanced level \_\_\_

Will Enroll at the 4000 level or higher \_\_\_

University of Salamanca  
In-Residence Program  
in Language and Culture

**Section 2**

**TO BE COMPLETED BY UNIVERSITY FACULTY ONLY**

Please return to  
Dr. Alberto Ferreiro  
Seattle Pacific University  
Department of History  
Seattle, WA 98119

**Confidential Reference**

Name of Applicant: \_\_\_\_\_

Relationship or association with Applicant: \_\_\_\_\_  
To the Referee:

The student named above is an applicant for the University of Salamanca Summer Program in Language and Culture.

The program requires that students enroll in language courses at the University of Salamanca and will attend lectures in History and Culture as well. We are seeking highly motivated mature individuals who are serious about learning Spanish and who can easily face the challenge of interacting with and assimilating a different cultural environment. To this end every facet of the program, including the excursions, will have a strong pedagogical emphasis. Your appraisal of the candidate is deeply appreciated.

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Signature

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# University of Salamanca

## Cursos Internacionales

### ‘Cursos de Lengua y Cultura Españolas’

28 June – August 2, 2008

The University of Salamanca through its ‘Cursos Internacionales’ offers individuals the opportunity to participate in an in-Residence Program in Salamanca, Spain. I, \_\_\_\_\_, voluntarily plan to participate in the 2008 PROGRAM in ‘Cursos de Lengua and Cultura Españolas’ at the University of Salamanca, from July 2 to July 30. This release of Liability and Agreement is made for the benefit of the University of Salamanca (hereafter U of S) and the Director- Group Organizer, Alberto Ferreiro (hereafter DGO). I understand that the execution and delivery of this Release is a condition precedent to me being allowed to participate in the PROGRAM.

I acknowledge that I have read and understood the following statements and agree that:

Initial \_\_\_\_\_ there are certain risks associated with international and domestic travel and residence in an off-campus community that may cause personal injury or loss of life. These risks may include, without limitation: exposure to potentially serious health and safety hazards, personal injury or loss of life from transportation accidents; personal injury or loss of life from storms, floods, earthquakes, and other natural disasters; personal injury or loss of life from infectious diseases, inadequate medical care, remote access to medical treatment; personal injury or loss of life from armed insurrections, and terrorist activities;

Initial \_\_\_\_\_ U of S and its staff and the DGO cannot control risks and are not in a position to guarantee my personal health or safety during my participation in the PROGRAM;

Initial \_\_\_\_\_ Prior to participation in the PROGRAM, I will consult with a health care practitioner of my choice in order to become familiar with Biomedical Hazards and other risks to my personal health that may be encountered in the location(s) of the PROGRAM, and to obtain the appropriate means of Medical Prevention or mitigation to my personal health;

Initial \_\_\_\_\_ I am responsible to have taken the prescribed shots and will carry with me certain prescribed medicines to protect me from various identified diseases and other elements detrimental to my personal health;

Initial \_\_\_\_\_ I will exercise reasonable and /or recommended precautions with respect to food, drink, personal hygiene, personal conduct, and exposure to known disease factors. I further agree to follow the health guidelines which I received before or while participating in the PROGRAM;

- Initial \_\_\_\_\_ I grant U of S and DGO full authority to take whatever action they feel is warranted under the circumstances regarding my physical and mental health and safety, including placing me, if I am unconscious, in a hospital at any point for medical services and treatment, or if no hospital is available, to place me in the hands at any point for medical services and treatment, or if no hospital is available, to place me in the hands of a local health care provider for treatment. U of S is further authorized to return me to the United States for medical treatment if necessary;
- Initial \_\_\_\_\_ I agree to check with my health care provider in the USA about health care coverage and procedures for reimbursements for any medical bills not covered by the U of S;
- Initial \_\_\_\_\_ I have been given information about optional health insurance and other benefits that may not be covered by the U of S, such as repatriation of remains and the like. It is entirely up to me to decide whether to purchase or not this additional coverage.
- Initial \_\_\_\_\_ I have been given information about the health care coverage plan SANITAS from the University of Salamanca and will check with my health provider here in the USA about any health care coverage not provided by SANITAS;
- Initial \_\_\_\_\_ I am aware that my behavior can reflect, for better or worse, upon U of S. Throughout the experience I will behave in a manner consistent with the rules and regulations of the U of S, of which I have received a copy. In the event that the PROGRAM DGO or the U of S, in their exclusive discretion, should determine that my conduct or academic performance is detrimental to the PROGRAM or to other participants, the DGO and the U of S may terminate my participation in this PROGRAM. If my participation is terminated in this way, it will be my responsibility to make any return travel arrangements myself, at my own expense.
- Initial \_\_\_\_\_ I understand and agree that I am responsible to have sufficient funds available: for 1) maintenance while participating in the PROGRAM, 2) restoration of any Loss, and 3) my return transportation if I choose to voluntarily leave the PROGRAM early;
- Initial \_\_\_\_\_ I understand that no refund will be granted to me if I am expelled from the PROGRAM, or voluntarily leave the PROGRAM early;
- Initial \_\_\_\_\_ I understand that if I withdraw from the PROGRAM at any time, before or during, that certain costs will not be refundable as determined by the U of S and the DGO. Also, that I will have to deal directly with the airline and is not the responsibility of the U of S or the DGO.
- Initial \_\_\_\_\_ I understand that if I participate in any non-University activities that I alone am responsible for my safety and the U of S and the DGO are not responsible for any harm that may come upon me, and it may result in my expulsion from the PROGRAM;
- Initial \_\_\_\_\_ I understand that it is not permitted of me to take part in any excursions at any time that are not sponsored and led either by the U of S or the DGO. A violation of this rule may result in expulsion from the PROGRAM;

- Initial \_\_\_\_\_ I understand all services and accommodations I receive while off-campus are subject to the laws of the location in which they are provided;
- Initial \_\_\_\_\_ Should I have or develop legal problems while on the PROGRAM, I will attend to the matter with my own personal funds. U of S and the DGO are not responsible for providing any assistance under such circumstances.
- Initial \_\_\_\_\_ If I become detached from the PROGRAM group, fail to meet a scheduled departure arrangement, or become ill or injured, I will bear all responsibility and costs to seek out, contact, and reach the group at its next available destination;
- Initial \_\_\_\_\_ I am responsible for my belongings, U of S and the DGO are not responsible for PROGRAM member's possessions that are lost, stolen, or damaged while participating in the PROGRAM;
- Initial \_\_\_\_\_ I am responsible for my own well being. U of S and the DGO does not intend to monitor or control the decisions, choices, and activities of my own, other participants in the PROGRAM, or of those providing services to PROGRAM participants;
- Initial \_\_\_\_\_ I understand that terrorist acts occur at random and are unpredictable. I acknowledge that I must be aware of my surroundings, and that assistance from law enforcement in certain situations may not happen quickly. I shall be conscious to avoid situations or areas that maybe designated as 'unsafe' by the U.S. Department or other governments;
- Initial \_\_\_\_\_ I have read and understood the material provided to me by the U of S and the DGO with respect to the PROGRAM and accept the terms thereof;
- Initial \_\_\_\_\_ I understand I am required to attend all scheduled PROGRAM meetings prior to leaving on the PROGRAM. Failure to attend any scheduled PROGRAM meeting will result in termination of my participation in the PROGRAM;
- Initial \_\_\_\_\_ I grant U of S and the DGO permission to reproduce in their campus yearbooks, catalogs or other advertising or promotional materials any photographs, movies, or sound recordings of me taken while I am participating in the PROGRAM, and also any written statements I may make concerning the PROGRAM;
- Initial \_\_\_\_\_ I understand that it is my responsibility to meet with my academic advisor and fill out the 'Application for Approval to Study Abroad' as required by my university or college for granting of equivalency of credit BEFORE participating in the PROGRAM. The U of S and the DGO cannot be held responsible for failure of the applicant to execute this procedure which may result in receiving no credit at all from the home institution of the student;
- Initial \_\_\_\_\_ I agree to fulfill all requirements expected of me by the University of Salamanca. I agree to turn in all of the work required by 15 September 2008 for me to obtain a letter grade;

Initial \_\_\_\_\_ I understand that after 1:00 pm July 30, 2008, I am responsible for my personal travel arrangements and related activities;

Initial \_\_\_\_\_ I agree that this agreement is meant to be as broad and inclusive as permitted by, and will be construed under, Washington law, and that of King County, Washington, USA will serve as the venue for any legal proceedings incident to the PROGRAM. The terms of this agreement are severable, such that if a court of law holds any term to be illegal, unenforceable, or in conflict with law, the validity of the remaining portions will not be affected. This agreement supersedes any earlier written or oral understandings or agreements between U of S and the DGO and Participant;

Initial \_\_\_\_\_ In spite of these risks, I willingly participate in the PROGRAM and do not hold the U of S, the DGO, or any hired organization or individuals responsible for my well being while participating. I assume all risk, dangers, and hazards that may arise from participating.

**NOW THEREFORE**, in consideration of the privilege to participate extended to me by the University of Salamanca , through its officers, agents, servants and employees, I do hereby, for myself my heirs, executor and /or administrator, successors, assigns or my agents, remise, release and forever discharge the University of Salamanca and the DGO and all of its officers, agents, servants, employees, and all other persons, firms corporations, associations or partnerships (hereinafter 'Releasees') acting officially or otherwise, from any and all actions, cause of action, claims and demands for, upon, or by reason of any injury, damage, loss or death which may occur from any cause including but not limited to any accident while participating individually or with others on the 2008 University of Salamanca Program in Language and Culture. Such remise release and discharge shall extend to but shall not be limited to any claim arising from the sole negligence or concurrent negligence on the part of Releasees.

I have carefully read this form and fully understand its contents. I am aware this is a release of liability, a waiver of claims, an agreement not to sue, and a contract between myself and the University of Salamanca and the DGO, and for the benefit of others described herein, I sign it of my own free will.

Participant's Name (PRINT): \_\_\_\_\_

Participant's Signature: \_\_\_\_\_ Signature Date: \_\_\_\_\_