

## APPLICATION FORM – FACULTY-LED CLASSROOM ABROAD

### FLCA@Home-Storytelling

Please fill in the application form using Adobe – not by hand. The completed application form and all relevant travel documents must be sent to [educationabroad@durhamcollege.ca](mailto:educationabroad@durhamcollege.ca) by **January 15, 2021**. We encourage you to apply early and to reach out if you have questions as you prepare your application.

For a **physical FLCA**, please mark an **X** in the field in front of each document and enclose all of them with your application:

<input type="checkbox"/>	Completed and signed Application Form – Faculty-led Classroom Abroad
<input type="checkbox"/>	Completed and signed Assumption of Risks and Release of Liability Agreement
<input type="checkbox"/>	Completed and signed Request for Student Travel Outside Ontario
<input type="checkbox"/>	Completed and signed Traveller Information and Emergency Contact Form
<input type="checkbox"/>	Completed and signed Media Release Form
<input type="checkbox"/>	Completed and signed Statement of Medical Form
<input type="checkbox"/>	A copy of the information and photo page of a valid passport

For a **virtual FLCA**, please mark an **X** in the field in front of each document and enclose all of them with your application:

<input type="checkbox"/>	Completed and signed Application Form – Faculty-led Classroom Abroad
<input type="checkbox"/>	Completed and signed Media Release Form
<input type="checkbox"/>	A copy of your timetable

**Participant Information**

Personal Information in this section must be provided as it appears on your passport.

First Name:	Middle Name:	Last Name:
Date of Birth (MM/DD/YYYY):	Gender (M/F/Other):	Status in Canada: Citizen PR Study Permit Other. Please specify: _____
Passport Number:	Expiry Date (MM/DD/YYYY):	
Student Number:	Current Semester:	GPA:
DC Program:		Academic School:
Street Address:	City & Province:	Postal Code:
Phone Number:	DC Mail:	
Have you participated in any <a href="#">Education Abroad programs</a> before? (ISP/FLCA/SA/IWIL) Yes. Which program? _____ No.		Have you received the Education Abroad Travel Bursary before? Yes. Amount? _____ No.

 Please indicate your availability below by marking an **X** in the field(s) of your available time frame(s).

	Monday, 9:00 AM – 1:00 PM
	Tuesday, 9:00 AM – 5:00 PM
	Wednesday, 9:00 AM – 1:00 PM
	Thursday, 12:00 PM – 5:00 PM
	Friday, 9:00 AM – 12:00 PM

**Program Information**

Name of Faculty:	Country Physically/Virtually Travelling to:
Program (Proposed) Start Date (MM/DD/YYYY):	Program (Proposed) End Date (MM/DD/YYYY):

Why are you interested in participating in this FLCA@Home-Storytelling project?

Tell us about your knowledge of the country that you are physically/virtually travelling to.

What challenges can you anticipate and how will you prepare yourself for the challenges?

How will you work effectively as a team member in a cross-cultural environment?

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### Declaration, Consent and Acknowledgement

I have read and agree to the following: 1. The information given on this application form is complete and accurate; 2. The information I have provided in this application form is subject to verification by Durham College (DC); 3. I will provide supporting documentation to verify my eligibility upon request; 4. I consent to the disclosure of the personal information I have given in this application form to the third parties for the purposes of administering this program; 5. I have read and understand the Education Abroad Cancellation Guidelines, and I will take responsibility for the financial implications should I cancel my participation in this program after applying.

I understand that any misrepresentation on this application form or failure to provide my consent to authorize DC to verify the information on this application form may result in the cancellation of my application.

Student Signature:

Date:

### Freedom of Information and Protection of Privacy Act

In accordance with Section 39(2) of the Freedom of Information and Protection of Privacy Act, 1990, the personal information collected on this form is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002 and may be used and/or disclosed for the purpose of organizing and/or administering approved College events. If you have any questions about the collection, use and disclosure of your personal information by the College, please contact the Freedom of Information and Protection of Privacy Coordinator, 2000 Simcoe Street North, Oshawa, ON, L1H 7K4, 905.721.2000 ext. 3292.