



EKU Study Abroad Planning Guide

Education Abroad Office • Keith Building, Room 129

<http://studyabroad.eku.edu/>

Email: EKUAbroad@eku.edu • Phone: 859-622-8794

Name: _____

Term of Study Abroad Program: _____

EKU ID: _____

Exact Dates of Study Abroad Program: _____

Study Abroad Program: _____

*Studying Abroad requires independence and personal responsibility! After you have been accepted into a Study Abroad Program, **YOU** will need to submit the following documents to the Education Abroad Office:*

_____ Complete the online EKU Study Abroad Application on the <http://studyabroad.eku.edu/study-abroad-application> website.

_____ Copy of your **Passport**. (If you do not already have a passport, allow at least 8 weeks for delivery from the time you submit your application. You will also need to plan ahead in case you need to apply for a Visa for your study abroad program.) It is the student's responsibility to stay on top of Visa and residency permit requirements

_____ **Financial Documents** (Promissory/Deferral Note, Budget Worksheet, Program Invoice)

Deadlines for completing Study Abroad Financial documents:

- Studying abroad in **Fall: May 1**
- Studying abroad in **Spring: November 1**
- Studying abroad in **Winter: October 1**
- Studying abroad in **Summer: April 1**

Students must submit all necessary documents to the Study Abroad office by the deadlines above in order to get aid for their study abroad term. Students who submit the above financial paperwork after the deadline may experience significant delays in receiving financial aid or scholarships.

_____ **Study Abroad Course Pre-Approval Form** signed by your advisor prior to leaving (unless you are participating in KIIS, CCSA, or an EKU Custom Program), *If your course schedule changes, it is your responsibility to have any new courses evaluated.*

_____ Provide your **Flight Itinerary** to the Study Abroad Office.

_____ EKU requires that all students who study abroad have international health insurance. It is your responsibility to purchase insurance through our contracted provider (**CISI**) for the duration of your program if adequate international health insurance is not provided by your program provider.

MANDATORY PREDEPARTURE ORIENTATION ON: _____