Monday June 26 - Saturday August 5, 2017

Instructions for Completing Your Application Total Fee is \$7,900

- 1. Complete the Application Form.
- 2. Have your parents or guardian read and sign the Statement of Responsibility form and return it with your application.
- 3. Your application must include a statement from a physician indicating that you are able to undertake travel abroad. Any special conditions (medications, etc.) should be included in this statement.
- 4. Attach a transcript.
- 5. Your completed application must be submitted to your home campus representative by **February 15**, accompanied by a check for \$250 (refunded to you only if you are not accepted).
- 6. Notification of the Selection Committee's decision will be made by early March. Initial payment of \$3,825 is due on March 15 with your written acceptance to the program. Balance of payment of \$3,825 is to be made by April 15.
- 7. Due to St. Anne's policies, no refund for room and board expenses will be made after May 1. Refunds for the rest of the VPO tuition and fees will be made up to June 1 if circumstances force a student to cancel. Beyond that date, the student will recover only the portion of tuition and fees that the VPO itself can recover. The \$250 deposit is non-refundable.

<u>All checks</u> should be made payable to your home institution and given to your campus VPO representative:

Hampden-Sydney College
Prof. Shirley KaganSweet Briar College
Prof. Anthony W. Lilly IIMary Baldwin University
Prof. Mary Hill ColeVirginia Military Institute
Prof. Duncan RichterRoanoke College
Prof. Mark MillerWashington and Lee University
Prof. Holly Pickett

APPLICATION

PART I: Personal Information (Print or type all entries)

Name:				
First	Middle	Last		
Date of Birth				
Major subject, if applicable		Advisor		
Your full campus address				
		P. O.	Box	
	City		State	Zip
Your e-mail address				
Address of parent or guardian				
		St	reet and No.	
	City		State	Zip
		Telepho	ne	

If emergency address would be different, please indicate.

PART II: References

Please ask three (3) persons to submit references for you. These persons should include your faculty advisor and two other faculty/staff members. Please list the names and positions of the three.

PART III

What travel, study, employment or living experience have you had overseas? Where? Explain circumstances. (Use back of sheet if needed.)

PART IV

List college courses taken in history and in English literature and any others that may be applicable, including those in which you plan to enroll.

PART V State briefly your reason(s) for wanting to study in this program.

PART VI

During the Program, the student must attend ALL of the lectures unless she or he has received advanced permission from the American Director to be absent. She or he must attend, participate in, and fulfill all obligations in every tutorial session.

The tutors will assess the tutorial work and submit to the American Director a grade and an evaluative discussion of the student's work. While evaluation of the course work will rely heavily on the tutor's evaluation, the American Director's assessment of the lecture attendance and academic pursuit by the student will enter into the final grade.

* * * * * * *

I agree to accept the supervision and authority of the American Director of the Virginia Program at Oxford. Throughout my association with the Program, I agree to comply with the regulations covering the Program and to conduct myself responsibly. Also, I affirm that the information I have presented in this application is accurate.

Date

Signature

Are you asking for financial aid?_____

If so, how much?

STATEMENT OF RESPONSIBILITY, LEGAL RELEASE AND WAIVER, VPO ENDORSEMENTS

I, _______, a participant in the Virginia Program at Oxford, do voluntarily and without reservation on behalf of myself, my heirs and my estate, waive any and all claims of whatever nature for any injury, loss, damage, accident, delay, irregularity, or expense arising from the use of any vehicle or services, strikes, war, weather, sickness, quarantine, government restrictions, or regulations or from any act or omission of any airline, railroad, bus transportation, sight-seeing, hotel or any other service or transporting company, firm, individual or agency, or for any cause whatsoever in connection therewith against any institution in the Virginia Program at Oxford, the host schools abroad, or any staff member accompanying this Program, their heirs or their estate.

I also grant the Virginia Program at Oxford or any of its officers or agents full authority to take whatever action they feel is warranted under the circumstances regarding my health and safety. This authority will permit the Virginia Program at Oxford, its officers or agents at their discretion to place me, at myown expense, in a hospital at any point for medical services and treatment, or if no hospital is available to place me in the hands of a local medical doctor for treatment. The Virginia Program at Oxford, its officers or agents are further authorized to fly me back to the United States at my own (or my parents' or guardians') expense for medical treatment if this is deemed necessary by the Virginia Program at Oxford, in consultation with local medical authorities.

Though guided and advised by the American Director, students are responsible for their conduct and welfare. The Virginia Program at Oxford or its agents reserve the right to make schedule adjustments where necessary in emergencies or changed conditions or in the interest of each group, to alter prior to group departure the cost in order to meet unexpected changes in airline fares, lodging, rates, etc. The announced fee is based on current tariffs, which are subject to change.

Insurance coverage while participating in the Program is the responsibility of the student or her or his parents or guardians. It is also the participating student's responsibility to obtain and carry with herself or himself a valid passport and any other travel documents deemed necessary by the American Director.

It is understood that the American Director may drop a student from the Program for failure to comply with regulations. If a participant's membership is terminated, only the funds not actually used will be refunded and the former participant will be sent home at her or his own expense.

Date

Signature of Participant

Signature of Parent or Guardian

Summer 2017

CONFIDENTIAL RECOMMENDATION

The applicant should sign the waiver below, fill in her or his name on the blank line below, and give this form to the person writing the recommendation in time for her or him to complete it by February 15.

Waiver of Right of Access to Educational Records: "I hereby waive my right of access to confidential statements and recommendations which are contained in, or are a part of my educational records used in the selection process of the Oxford Selection Committee and the Director of the Program."

Date

Signature

______ (student's name) is applying for admission to the Virginia Program at Oxford. We would appreciate your frank appraisal of her or his intellectual and emotional strengths and weaknesses. Please refer to the applicant's adaptability, cooperativeness, and maturity that will enable her/him to live in an academic community in Oxford University. Also comment on the student's command of written and spoken English, ability to work and think independently, and overall academic motivation. Should you be writing recommendations for more than one student who is applying for this Program, please rank them.

Name of Recommender

Position at College

Date

Signature

Please return to: Prof. Holly Pickett Department of English Payne 304 Washington and Lee University

Summer 2017

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