



# APPLICATION FOR NATIONAL STUDENT EXCHANGE



www.wou.edu/student/nse

Debbie Diehm, NSE Coordinator

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APPLICATION DEADLINE:

**OCT. 16—MID-YEAR PLACEMENT**

Date Application Submitted: \_\_\_\_\_

Nonrefundable Application Fee Received: \_\_\_\_\_

The application is not considered complete until the fee has been paid.

Prior to completing this application, read:

- NSE eligibility requirements, policies, and procedures (pages 9 - 16 of the *NSE Directory*)
- Campus NSE policies and procedures

## APPLICATION FEE

- There is a \$185.00 application fee which is non refundable and covers the processing fee.
- Payment can either be in cash, check or we can charge your WOU student account. If you would like the application fee billed to your account, please read and sign the statement below:

I authorize Student Affairs to charge to my WOU student account - the National Student Exchange application fee of:  \$185.00

\_\_\_\_\_  
(Signature)

## APPLICATION MATERIAL REQUIREMENTS

- Application fee (\$185.00 - see pg. 4 for more details).
- One Recommendation Letter
- A one page essay discussing your goals and reasons for exchange participation
- Interview (*your application will not be accepted without completing an interview at the time of submission*)

PLEASE TYPE OR PRINT VERY CLEARLY.

## 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 \_\_\_\_\_

Current Phone (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_ extension \_\_\_\_\_ Permanent Phone (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

Alternate Phone/Cell Phone (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

WOU E-mail \_\_\_\_\_ Alternate E-mail \_\_\_\_\_

Social Security Number \_\_\_\_\_ Campus I.D. Number \_\_\_\_\_

## DEMOGRAPHIC INFORMATION

Date of Birth (MM/DD/YYYY): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Gender:  Female  Male

Are you currently living in on-campus housing?  Yes  No

Are you a resident of Oregon?  Yes  No

Country of Citizenship:  United States  Canada  Other \_\_\_\_\_

Non-resident alien – If non-resident alien, visa type \_\_\_\_\_  Resident alien

Primary reason(s) for exchange - *check all applicable*

access different courses/faculty

enter host campus honors program

evaluate graduate schools

exchange as a resident assistant

live in a different area

language study

personal growth

look for future employment

participate in host campus international program

other: \_\_\_\_\_

## SCHOLASTIC AND OTHER INFORMATION

Class Level at time of exchange:  Fr  So  Jr  Sr Cumulative grade point average: \_\_\_\_\_

Number of credits completed to date: \_\_\_\_\_ Number of credits enrolled in current term: \_\_\_\_\_

Expected graduation date: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Will you need courses in your major while on exchange?  Yes  No

Are you requesting financial aid (Plan A) from the host campus?  Yes  No

Are you currently receiving financial aid?  Yes  No Are you receiving any scholarships?  Yes  No

Are you currently enrolled in the honors program?  Yes  No

Is this your first time applying to NSE?  Yes  No

Marital Status:  Single  Married

Will you be accompanied on exchange by: spouse  Yes  No children  Yes  No

Do you wish to go on exchange with another student(s):  Yes  No

If yes, name of the student(s) \_\_\_\_\_

Name of campus at which the student is enrolled: \_\_\_\_\_

## EXCHANGE REQUESTS

(In order of preference, which campuses do you wish to exchange to)

Full Name of College/University	Plan A or B <small>Plan A - Pay host institution Plan B - Pay home institution</small>	Period of Exchange (Please check each that applies)	Need Housing?
	<input type="checkbox"/> A only <input type="checkbox"/> B only <input type="checkbox"/> A or B(prefer___)	<input type="checkbox"/> Full Academic Year <input type="checkbox"/> Fall Semester <input type="checkbox"/> Spring Semester <input type="checkbox"/> Fall Quarter <input type="checkbox"/> Winter Quarter <input type="checkbox"/> Spring Quarter	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Preferred
	<input type="checkbox"/> A only <input type="checkbox"/> B only <input type="checkbox"/> A or B(prefer___)	<input type="checkbox"/> Full Academic Year <input type="checkbox"/> Fall Semester <input type="checkbox"/> Spring Semester <input type="checkbox"/> Fall Quarter <input type="checkbox"/> Winter Quarter <input type="checkbox"/> Spring Quarter	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Preferred
	<input type="checkbox"/> A only <input type="checkbox"/> B only <input type="checkbox"/> A or B(prefer___)	<input type="checkbox"/> Full Academic Year <input type="checkbox"/> Fall Semester <input type="checkbox"/> Spring Semester <input type="checkbox"/> Fall Quarter <input type="checkbox"/> Winter Quarter <input type="checkbox"/> Spring Quarter	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Preferred
	<input type="checkbox"/> A only <input type="checkbox"/> B only <input type="checkbox"/> A or B(prefer___)	<input type="checkbox"/> Full Academic Year <input type="checkbox"/> Fall Semester <input type="checkbox"/> Spring Semester <input type="checkbox"/> Fall Quarter <input type="checkbox"/> Winter Quarter <input type="checkbox"/> Spring Quarter	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Preferred

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## RECOMMENDATION LETTER

You must have **one** letter of recommendation from your advisor **OR** a faculty/staff member of Western Oregon University. This must be completed on the Recommendation Letter form and submitted with application.

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## ESSAY

Please write a one- to two-page essay about why you are interested in the exchange program. Discuss your reasons for participating and your goals while on exchange. Submit with application.

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## OTHER CONSIDERATIONS

Have you ever been convicted of a felony?  Yes  No

Are you on probation, parole, or have any legal judgments pending against you either inside or outside campus?

Yes  No If yes, please explain: \_\_\_\_\_

Are you currently under any campus disciplinary action for violation of codes of academic or student conduct?

Yes  No If yes, please explain: \_\_\_\_\_

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## EMERGENCY CONTACT

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Street \_\_\_\_\_

City, State/Province, and Zip/Postal Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ E-mail \_\_\_\_\_

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## SPECIAL NEEDS OR CIRCUMSTANCES

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.

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## WITHDRAWAL FROM NSE

If at anytime after submitting this application there is the need to withdraw from the program prior to placement, please contact Debbie Diehm at [diehmd@wou.edu](mailto:diehmd@wou.edu) as soon as possible. After being placed at a host school and you have accepted this placement, to withdraw from the program, you must fill out a form which can be found at the Werner University Center (WUC) Information Desk. This form must be completed and brought directly to Student Affairs c/o the WUC Information Desk. If you chose to withdrawal from NSE, your application fee will not be refunded.

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## 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 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 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 release information contained in my application, letters of recommendation, transcripts, and other information required as part of the NSE application process to the National Student Exchange Central Office and to the NSE host institution at which I am placed.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## SIGNATURE

I have read and fully understand:

- information on eligibility, policy, and procedures presented in the *NSE Directory* (pages 9-16)
- 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
- I must, at all times prior to and during my exchange, meet the eligibility requirements (academic, behavioral, and financial) of the program and those of my home and host campuses, and that failure to do so will result in the cancellation of my exchange.

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, accurate, and true to the best of my knowledge. I acknowledge that I am signing freely, voluntarily, and under no compulsion.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## OPTIONAL

Where did you learn about National Student Exchange? (*check all applicable*)

Professor     Academic Advisor     NSE Presentation     Flyers     Fellow Student Presentation

Others (*please specify*) \_\_\_\_\_

**PLEASE CALL AND MAKE AN APPOINTMENT TO RETURN THIS FORM TO:**

**NSE COORDINATOR**

**DEBBIE DIEHM, STUDENT AFFAIRS**

**WESTERN OREGON UNIVERSITY**

**PHONE: 503-838-8423 OR EMAIL: [studentaffairs@wou.edu](mailto:studentaffairs@wou.edu)**