## School of Urban and Regional Planning Department of Geography and Planning Queen's University

## EXCHANGE PROGRAM APPLICATION SUMMARY AND CONSENT FORM

**APPLICATION SUMMARY** 

Name:	
Student No.:	
E-mail Address:	Telephone #:
The following documentation must be submitted Tick the items that are submitted with this form	
<ol> <li>Exchange Program Application Summary and C</li> <li>Queen's University Bursary Assistance Application</li> <li>https://www.queensu.ca/studentawards/forms/exch</li> <li>Personal Statement on why the exchange will fit</li> </ol>	tion Form [optional]
are suitable for you, taking into account course req etc. Otago, NZ, Winter term, Second year	term dates at each institution and determine whether they uirements, travel, summer employment, convocation, exams,
<ul> <li>University of Western Australia, Winter term, S</li> <li>Curtin University, Perth, Australia, Winter Term</li> <li>Other – please list</li> <li>with Queen's. Start by visiting: <a href="https://www.queen">https://www.queen</a></li> </ul>	econd year  n, Second year  and confirm availability for a graduate student exchange eensu.ca/sgs/faculty-staff/international-students-exchanges
Check [✓] all international experiences/visits/op  SURP 827 international project course,  SURP International Experience Award,  China Internship	portunities you have had to date:
Queen's a committee of SURP core faculty will ran	an exchange exceeds the number of places available to ak order the MPL applications. Preference will be given to atternational opportunities, and then to exchanges which best

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## OFF CAMPUS ACTIVITY SAFETY PROCEDURES UNDERTAKING and OFF-CAMPUS STATUS

## Please carefully read the following statements and sign below:

Signed by the Student:

- a. I understand that if selected to go on exchange I must complete all the required procedures of the Off-Campus Activity Safety Policy (OCASP) (<a href="https://safety.queensu.ca/campus-activities-ocasp">https://safety.queensu.ca/campus-activities-ocasp</a>). In the process of completing my online OCASP form, I will be automatically enrolled in the Queen's University Emergency Support Program and I agree to complete the Pre-Departure Orientation Training for Study/Work/Travel Abroad Participants. I undertake to complete all the required steps, and understand that if I do not do so my exchange place may be revoked or transfer credit may not be granted.
- I understand that I must apply for and receive Full Time, Off Campus status from the School of Graduate Studies prior to the beginning of the exchange period. <a href="https://my.queensu.ca/documents/6845172/7073515/FULLTIMEOFFCAMPUSREQUEST.pdf/212da329-826d-4a9e-b1f5-6c0fe38e0d09">https://my.queensu.ca/documents/6845172/7073515/FULLTIMEOFFCAMPUSREQUEST.pdf/212da329-826d-4a9e-b1f5-6c0fe38e0d09</a>
- c. When I receive my acceptance letter from the host university, notifying me that I have been accepted to go on exchange, I will submit a copy my acceptance letter to SURP; <a href="mailto:a.miller@queensu.ca">a.miller@queensu.ca</a>.
- d. I understand that the timing of the term(s) of my exchange will be different from the timing of the term(s) at Queen's University. I further understand that as a Graduate student I am responsible for maintaining enrolment and paying Queen's University tuition until completion of all requirements of the MPL program, and that Queen's University must receive an official transcript from my host university showing that the courses taken there have been successfully completed, before my degree completion can be processed and tuition assessments terminated..

Date:
CONSENT TO ACCESS TRANSCRIPT (if required)
I give my consent for the School of Graduate Studies to obtain a copy of my transcript to be used as part of my application to go on exchange.
Signed by the Student:
Date:
CONSENT TO ASSIST OTHER EXCHANGE STUDENTS
If I am selected to go on exchange, I give my consent for my name, email address and exchange destination to be included on a list circulated to all Queen's MPL students going on exchange in the next two academic years and to assist in recruiting students from our partner institutions and SURP for future exchanges.
Signed by the Student:
Date:

By authority of the *Royal Charter*, 1841 of Queen's University, as amended, personal information is collected on this form to ensure accurate recording of the requirement on the student's official academic record. The completed form will be kept for one year in accordance with the requirements of the *Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c.F.31 and thereafter destroyed. If you have any questions or concerns about the information collected or how it will be used, please contact the SURP Director at suppdirector@queensu.ca, or 613-533-6030.

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