



Long Term (Academic Year / Semester Programs) Study Abroad Checklist

Name: _____ Student ID Number: _____

Phone: _____

Permanent Address: _____

Campus Address: _____

Date when you will leave this address: _____

Summer Address: _____

Summer Phone: _____

Date of departure for overseas: _____ Flight Information: _____

Application:

Have you turned in a complete ISEP/Bilateral application? Yes No

Passport and Visa:

Have you applied for your passport? Yes Date No

Have you applied for your visa? Yes Date No

Fees:

Have you paid the ISEP \$355* Application Fee? (if applicable) Yes No N/A

Have you paid the ISEP \$150 semester/ \$300 full year BU Study Abroad Fee?
(if applicable) Yes No N/A

Have you paid the Bilateral \$ 300 semester/ \$500 full year Bilateral placement & BU Study Abroad Fee?
(if applicable) Yes No N/A

Have you talked with the person in the U.S. responsible for payment of your tuition about the billing procedures
and had them sign the Schedule of Fees form? Yes No

Person responsible for payment of tuition:

Name: _____

Address: _____

Phone: _____

Work

Home

Financial Aid:

Yes _____ No _____

Have you applied for financial aid for the semester(s) you will be abroad?

Release:

Yes _____ No _____

Have you and a parent signed the Release Form and returned it?

Emergency Contacts:

Yes _____ No _____

Have you turned your BU Emergency ID Card Form?

Yes _____ No _____

Have you turned in the Emergency Contact Form?

Yes _____ No _____

Have you registered with the U.S. Embassy for your study/travel destination? <https://travelregistration.state.gov/ibrs/>**Participant Placement Acceptance Form:**

Yes _____ No _____ N/A _____

Have you and a parent signed the Participant Placement Acceptance form and returned it?

Insurance:

Yes _____ No _____

Have you returned your medical insurance form and payment to ISEP or made arrangements for medical and evacuation insurance while abroad if not studying under ISEP?

Health:

Yes _____ No _____

Have you scheduled a medical check-up before you go? Have you returned the Physician's Form to the International Programs Office? (Required)

Yes _____ No _____

Have you scheduled a dental check-up? (Recommended, not required)

Yes _____ No _____

Are your immunizations up to date?

Academic Advising and Approval:

Yes _____ No _____

Have you met with an academic advisor to clarify what degree requirements you can fulfill on your exchange?

Yes _____ No _____

Have you completed the academic approval form?

Advance Registration for Return to Campus:

Yes _____ No _____

Have you prepared a tentative list of courses for the semester you return to campus and given it to the International Programs Office? (You will make final class selections on-line while abroad and register via e-mail from abroad.)

*Subject to change.