Consent Form for Semester Exchange Program Participation

To Dean of Graduate School of Asia-Pacific Studies

I, ______as an applicant to and participant in the semester exchange program held by the Graduate School of Asia-Pacific Studies (hereafter "GSAPS") of Waseda University, fully understand and agree to the terms and conditions as indicated below. I also agree not to lodge any formal objection or protest in the case that I may lose the right to participate in the semester exchange program or support from GSAPS or Waseda University by failing to comply with these terms and conditions.

1. <u>I understand that I am not allowed to withdraw from the Semester Exchange Program once</u> <u>GSAPS nominates me as a candidate for the Semester Exchange Program unless GSAPS accepts</u> <u>the circumstance and gives me approval to withdraw from the Semester Exchange Program.</u>

- 2. Each partner school has specific academic and non-academic requirements. I must familiarize themselves with the requirements of the partner school by consulting the relevant "Fact Sheet" if any.
- 3. As part of the application process, I have secured permission and agreement from my parents, guarantor or financial supporter to prepare sufficient financial resources for all the estimated expenses prior to my departure.
- 4. I understand that a GSAPS nomination does not ensure my participation in the program. I understand that the concerned university has the right to reject my application and that the rejection may rest on the conditions and circumstances of the concerned university.
- 5. I understand that GSAPS may determine to postpone or cancel the Semester Exchange Program according to the security condition in the host country or region and that I am required to return to Japan at the earliest possible opportunity. I also understand that GSAPS will not be able to refund any of the fees and expenses that I have shouldered in participating in the program such as airfare and visa application fee and I will be held responsible for any resulting cancellation fees and additional expenses in such event.
- 6. I understand that if I become unable to participate in the program after the notification of final result for some reason, I will be held responsible for any resulting fees and expenses. I understand that I will be held responsible for the entire cost of the air ticket and any other resulting fees.
- 7. If I have applied or am planning to apply for any scholarship, I am required to inform the GSAPS Office in a timely manner. If I am scheduled to receive any kind of scholarship during the exchange period, I must confirm with the scholarship organization that I will be allowed to leave Japan for participating in the Semester Exchange Program.
- 8. I agree to take full responsibility for all the necessary procedures, which include application documents to the concerned university, passport and visa, procedures required by GSAPS to participate in the Semester Exchange Program and to return to the School, credit transfer, insurance and others required for the program.
- 9. I will be insured by the designated traveler's insurance company and bear the insurance cost.
- 10. I agree to allow the following parties to share the personal details of myself and my guarantor provided to purchase the said insurance plan, my contact details provided to GSAPS and accident details during my study abroad period so that they may deal with the accidents, contact my guarantor and administer the semester exchange program: the Graduate School of Asia-Pacific Studies, any relevant offices of Waseda University, Campus Insurance Center Co. Ltd., insurance company designated by Waseda University, and the relevant ministries and embassies. I also agree to allow GSAPS to share my personal details with my host university.
- 11. I agree to allow GSAPS to receive my academic, health related, and/or other personal information from my host university for the purpose of the administration of the semester exchange program and for my safety.
- 12. I understand that GSAPS may use the personal details I have submitted in order to contact me for events and various briefing sessions held by GSAPS.
- 13. I understand the purpose of the Semester Exchange Program and will concentrate on the study to the best

of my abilities.

- 14. (For MA students) I understand that I am required to take at least one course provided by the partner school.
- 15. (For Doctoral students) I understand that I must conduct research under a supervisor at the partner school. I will indicate the name of professor I would like to be supervised by on the application form. I understand the decision concerning assignment of a supervisor (including whether a supervisor should be assigned or not) is entirely up to each partner school and GSAPS cannot guarantee I will be able to be supervised by a faculty member of my choice.
- 16. I agree to comply with the laws and regulations of my host country and host university while participating in the semester exchange program. I will also follow the guidance of the faculty members and advisors at my host university and respect the standards of decency in my host country.
- 17. I understand that I am a representative from GSAPS and Waseda University and must act responsibly. I will not lodge any complaint against or implicate GSAPS or Waseda University for the loss and/or damage caused by disaster, riot, terrorism, unforeseen accidents, infectious diseases, crimes, etc.
- 18. If I cause damage to my host university of a third party due to willful intent, negligence a violation of the law or public policy during the period of the semester exchange program, I will not hold GSAPS or Waseda University responsible for the cost of damages made to the host university or a third party by myself, I will take responsibility to compensate the cost owed to GSAPS or Waseda University.
- 19. I will stay, if any, in the accommodation designated by my host university or GSAPS. I understand that if any accommodation is not designated, I will be responsible to acquire a place to stay on my own.
- 20. As an MA student, I understand that I am encouraged to transfer the credits for at least one course earned at the partner school by completing the specified application procedure. For transferring credits, I must submit the application documents for the procedure to the GSAPS office by the designated date. The application will be reviewed according to GSAPS regulations and completed with GSAPS approval.
- 21. I will be required to fill out reports to the GSAPS Office. All or part of the reports may be made available to the public through Waseda University or my host university.

Date :		
Student ID:_	 	

Name : _____

Signature : _____