HAMPTON UNIVERSITY International Office

Office Location: Armstrong-Slater Bldg., 1st Floor * Phone: 757-728-6914 * Fax: 757-637-2572 Email: international office@hamptonu.edu Student Agreement on Registration for Study Abroad	
period of study abroad, I University, and that I make recognize that merit sche	in order to receive financial aid through Hampton University during my I must maintain a course load equivalent to full-time study at Hampton ust register (CSRT) concurrently at Hampton University each semester. I colarships from Hampton University, also called institutional funds, d to the costs of the Study Abroad Program(s).
immediately to the Inter foreign address. I will r	led in the Study Abroad Program, I agree to report any course changes national Office of Hampton University, and to give that office my equest an official transcript from my Study Abroad Program to be sent to of Hampton University at the following address:
	International Office Armstrong-Slater Building, First Floor Hampton University 200 William R. Harvey Way Hampton, Virginia 23668
<u> </u>	te responsibility for providing my own health, accident, life and understand that my primary resource for this insurance information is am.
University, and I accept expenses, not covered by study abroad experience	that I currently have no financial holds on my account at Hampton responsibility for all fees due to the Study Abroad Program, and other y the funds in my account at Hampton University, for the term of my . I acknowledge that failure to pay the balance due to the Study Abroad not to be able to obtain my official transcripts from the program.
Signature:	Date:
Local Address:	
Permanent Address:	
Local Phone:	Permanent Phone:
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