Application for PORT 250g: Cultures of Brazil & Lusophone Africa

Maymester 2019

PORT 250g: Cultures of Brazil & Lusophone Africa requires Departmental (D) Clearance for registration. To obtain D-clearance, students must complete an application and participate in a face-to-face interview with Dr. Oliveira. A maximum of ten (20) students may enroll.

All Dornsife programs that involve overseas travel require a nonrefundable commitment fee of $400, which is billed to the student’s Spring 2019 USC fee bill. After students complete the course, Dornsife will credit the student’s USC fee bill in the amount of $400. This commitment fee will not be refunded upon my withdrawal from the program, unless such withdrawal is completed in accordance with University policy before January 15, 2019.

All USC overseas programs, including PORT 250, require the purchase of ISOS emergency unless the student participates in the Student Health Insurance Plan (SHIP).

I. CHECKLIST FOR PORT-250 – Brazil Maymester APPLICANTS:
   1. ☐ COMPLETED application form
   2. ☐ SIGNED Nonrefundable Commitment Fee and Withdrawal Acknowledgement Form
   3. ☐ SIGNED copies of the following forms:
      • Know Before You Go
      • Medical Treatment Authorization
      • Travel Release
   4. __ ATTACH/REQUEST Recommendation Letters/Forms

II. SUBMIT COMPLETED APPLICATION TO Prof. Oliveira AT eoliveir@usc.edu

III. AFTER YOUR COMPLETED APPLICATION IS RECEIVED, WE WILL E-MAIL YOU FOR:

   5. __ IN-PERSON interview with Prof. Oliveira in THH 156L

IV. AFTER YOU HAVE BEEN ACCEPTED
   6. ☐ ENROLL in the course

The application cycle will start immediately. FOR FULL CONSIDERATION, SUBMIT COMPLETED APPLICATION BY 5:00PM November 15, 2019 via email to Dr. Oliveira @ eoliveir@usc.edu or the front desk at THH 156. After November 15, if the class is not full, applications will be considered on a rolling basis.
APPLICATION FOR REGISTRATION PERMISSION (D-CLEARANCE) TO REGISTER

Instructions: Please submit the following documents via email to: eoliveir@usc.edu

Student:
1. This application form completed and signed
2. Personal statement (No more than 250 words)
3. Subject line for your email: Brazil Maymester Program Application for “your name here”

Recommenders (2):
1. Please request that the Faculty fill out the Recommendation Form and email it directly from your USC email address to eoliveir@usc.edu
2. The comments in the recommendation form or letter of support should indicate the applicant’s suitability for an overseas Brazil Maymester Program.
3. Subject line for instructors’ letter: Brazil Maymester Program Letter of Rec. for “Student’s name here”

Student name: _______________________________ USC Email: _______________________________
Student ID: _____________ Cell Phone#: _____________ Permanent Phone #: _____________
Major: _______________________________ Minor: _______________________________
Class level: _______________________________ Expected Graduation Date: _____________
Local Address _________________________________________________________________
Permanent Address _________________________________________________________________

Passport Nationality _______________________________ Passport No. _______________________________
Passport Expiration date _______________________________ Birthday (mm/dd/yy): _____________
Do you speak Portuguese/Spanish? _____________ Where did you learn it? _____________

Portuguese courses taken at USC (indicate semester and instructor; include Fall 2018 and Spring 2018):
__________________________________________________________
__________________________________________________________
Overall GPA: _______________________________ Portuguese/Spanish GPA: __________________

Are you the recipient of a scholarship or other academic award? If so, which:

__________________________________________________________

Have you participated in a Study-Abroad opportunity before? Where? _______________________________

Names of TWO instructors who will provide recommendation letters:
1. __________________________________________ Course: _______________________________

__________________________________________________________
Person to contact in case of an emergency (U.S.):

Name: ___________________________ Relationship: ___________________________ Phone: ___________________________

Address: ___________________________ Email: ___________________________

Health Insurance Company: ___________________________ Policy No. ___________________________

Deposit:

*There is a $400 deposit added to the student's account when he/she is accepted to the program. This will be credited back at the end of the program. This commitment fee will not be refunded upon my withdrawal from the program, unless such withdrawal is completed in accordance with University policy before January 15, 2019.*

Signature ___________________________ Date ___________________________

Review of applications will continue until all spaces are filled
Brazil Maymester Program
Spring 2019

ACADEMIC STATEMENT OF PURPOSE:

In no more than 250 words, please explain your interest in taking a Maymester Study-abroad opportunity. In particular, why are you interested in PORT 250g: Cultures of Brazil and Lusophone Africa. What do you hope to gain from this experience? You will have a total of 4 class meetings on campus, and 3 weeks in Brazil. Are you prepared for this intense program? Describe your willingness to live and work in this new environment.
NONREFUNDABLE COMMITMENT FEE AND WITHDRAWAL ACKNOWLEDGEMENT

If you are accepted for participation in Cultures of Brazil & Lusophone Africa (PORT-250), you will be issued departmental clearance (D-clearance) to register for the course. Upon your registration in the course, your student account will be charged a $400 commitment fee that holds your place in the class. At the end of the class session, this fee will be removed from your fee bill, provided you complete the course.

NONREFUNDABLE COMMITMENT FEE

USC Dornsife academic programs that include travel collect a non-refundable $400 commitment fee from registrants in these programs. By signing below, you acknowledge responsibility for the commitment fee. By the official withdrawal deadline, students will also be responsible for housing fees.

WITHDRAWAL ACKNOWLEDGEMENT

I, ______________________________, acknowledge that I have read and understand the withdrawal and refund policy of my department special session program: Cultures of Brazil & Lusophone Africa (PORT-250). I understand that if I withdraw from this program, the strictest of applicable withdrawal refund policies (e.g., the policy with the greatest penalty) will apply.

Furthermore, I agree to a $400 charge to my USC student account. I understand that this commitment fee will not be refunded upon my withdrawal from the program, unless such withdrawal is completed in accordance with University policy before January 15, 2019.

________________________________________  ______________________________
Signature                                                                 Date

________________________________________  ______________________________
Signature of legal guardian is student is under 18 years of age  Date
Studying abroad may be a stressful event and we would like to assist you in better preparing you for your experience. It is important to note that studying away from home can be risky for those with medical or psychological health conditions that are not managed properly before departure. Therefore, students should take into consideration any special medical, physical, or psychological needs that may impact their participation in the program prior to departure. Please keep in mind that study abroad sites may not be able to accommodate all reported individual needs or circumstances.

**Pre-departure Checkups:**
You are strongly encouraged to schedule a medical exam at the Engemann Student Health Center ([http://engemannshc.usc.edu/](http://engemannshc.usc.edu/)) or with your family physician prior to departure.

A thorough dental exam is also strongly recommended.

For information on necessary or suggested vaccination for travel abroad, consult your family physician or the Engemann Student Health Center ([http://engemannshc.usc.edu/](http://engemannshc.usc.edu/))

**Students Using Medications:**
If you use medication/s, including asthma inhalers, on a regular basis you should take a supply to last throughout your stay and carry a letter from your physician explaining the medical necessity and treatment. Any medications taken overseas should be left in their original containers and be clearly labeled.

Prescription medication for legitimate health conditions may be scrutinized by foreign officials when going through Customs. In some countries drugs that are legal and readily available in the United States will be considered illegal, require a prescription, or a host country authorization to be allowed in the country.

If you are being treated for a psychological health condition work closely with your physician or mental health professional to understand possible triggers and how to reach out for help. It is in your best interest, if you are taking psychotropic medications, to be stable in your medication before starting your overseas experience. Discuss proper medication management with your doctor or mental health professional prior to your departure.

Mailing medication abroad: Most countries have very strict regulations on having medications shipped abroad. Students regularly find that refills of regularly taken medications in the U.S. get stopped by the host country’s Customs. Decisions on what medications may be mailed legally into some foreign countries are made by the host country government, not the U.S. Post Office. Students should call the host country government office in the U.S.

**Students with Different Abilities**
Passage of legislation such as the Individuals with Disabilities Education Act and the American with Disabilities Act has spurred schools in the U.S. to accommodate students
with varying abilities. It is important to know that other countries are not bound by U.S. legislation, and physical facilities and academic resources vary significantly from one overseas site to another. If you are currently receiving disability-related accommodations at USC or anticipate needing them at your program site, please contact Disability Services and Programs (DSP) located in the Student Union 301 or call (213) 740-0776, to discuss appropriate responses to your needs.

*Student Support and Advocacy, Division of Student Affairs - 6/11/2013*
Informed Consent for Study Abroad Programs

Students are expected to consider their physical and mental health and any special needs when deciding whether or not to study abroad and when choosing a program. Studying abroad involves challenges related to differences in facilities and physical conditions, cultural norms and expectations, and types of stress. Students studying abroad are also separated by distance from their familiar support networks and healthcare providers. All students—especially those with different physical or learning abilities, those with medical conditions, and those with psychological issues—are strongly encouraged to consider all potential challenges and consider whether studying abroad at the selected location is appropriate for them. Student may then take necessary steps to have a healthy experience abroad.

Examples of psychological issues that can be exacerbated or triggered while studying abroad include depression, anxiety, body image and eating disorders, panic attacks, and addictive behaviors. Examples of challenges for students with physical and learning disabilities include lack of wheelchair access, pedestrian-unfriendly infrastructures, and little or no accommodation for alternate testing situations.

Students are strongly encouraged to take the following measures to help increase the likelihood of a healthy and successful study abroad experience:

- Get a thorough medical exam and explain to the physician the location and nature of the study abroad program.
- Get any immunizations or take any medications (e.g. anti-malarial) necessary or suggested for the study abroad location and locations in which you plan to travel extensively.
- Bring a sufficient supply of needed medications, including asthma inhalers, along with prescriptions. Don't respond to the stresses of adjusting to a new culture by taking more than the prescribed doses of your medication, discontinuing medication without advice from a doctor, or taking medication prescribed to another student.
- In the case of a history of any psychological issues, consult with a physician or mental health professional and explain to the practitioner the location and nature of the study abroad program.
- In the case of disabilities (e.g. learning disabilities, physical disabilities), consult with Disability Services and Programs (DSP), Student Union 301, 213-740-0776.

Student acknowledges that she/he has read this informed consent and the attached “Know Before You Go” document and that she/he understands their meaning and effect.

Date: ___________________________ Student: ___________________________

Date: ___________________________ Parents or Legal Guardian: ___________________________
(If Student is under 18)

Date: ___________________________ USC: ___________________________
I ________________________________ am a willing participant in the USC sponsored overseas study program called _________________________________. I understand that I am financially responsible for any injury or illness I may sustain while overseas. I understand that the University of Southern California is not in any way responsible to pay for medical treatment on my behalf. In the event I am incapacitated due to a medical emergency, and am unable to authorize treatment to alleviate my condition, I authorize the University of Southern California’s employees, faculty or agents to act on my behalf and authorize such emergency treatment.

I acknowledge that this authorization does not create a duty on the part of the University, and I hereby release the University of Southern California and its trustees, employees, agents and representatives from any and all claims, causes of action, losses, liabilities, costs, fees and expenses arising or resulting from any injury or damage I may incur in the course of receiving medical care overseas.

__________________________  ______________________
Signature of Student/Participant  Date

__________________________  ______________________
Parent/Guardian (if student is under 18)  Date

Revised 06-10-2013
UNIVERSITY OF SOUTHERN CALIFORNIA

TRAVEL RELEASE

The parties to this Release are ______________________ (Student),
________________________________________________ (Student's parents or legal guardian, if student is under 18)
(both referred to hereafter jointly and severally as "Student"), and the University of Southern California (hereafter "USC").

The Student, with the consent of the Student's parents or legal guardian if necessary, has chosen to participate in the USC ___________________________ (hereafter "Program"), during the ___________________________ semester.

All students are considered adults and are expected to take responsibility for their actions while taking part in the Program. As adults, any activities that Student takes part in, whether as a part of a Program or separate from the Program, will be considered to have been done with their approval and understanding of any and all risks involved. Any students under 18 and/or considered dependents of their parents or guardians are responsible for giving all background or other relevant information about the Program to their parents or guardians.

Although USC may offer information to Student on aspects of foreign travel and particular destinations, Student agrees that he/she is responsible for determining the potential dangers of particular destinations, and the Student acknowledges that USC is under no duty to warn the Student of any particular danger or potential injury. Before deciding whether to visit a site under a travel warning, USC recommends that Student check with the U.S. Department of State website (http://travel.state.gov/travel/cis_pa_tw/tw/tw_1764.html) and the U.S. Centers for Disease Control website (http://www.cdc.gov/travel/) and read carefully the current travel warning/advisory, public announcements, and consular information sheet for the site in which Student seeks to study. Notwithstanding the foregoing, USC recommends that Student elects not to study in a site under a travel warning. Student acknowledges that Student has been made aware of the risks of foreign travel and more specifically, the risks of travel to the subject destination, and further acknowledges reading and understanding any applicable U.S. Department of State travel warnings. Student is participating in the Program with full knowledge of the risks inherent in such participation, including possible physical injury or other loss or damage and agrees to accept and assume any and all risks associated with participation in the Program. In consideration of USC's accepting Student into the Program, Student, her/his heirs, executors, administrators, employers, agents, representatives, insurers and attorneys, hereby releases and discharges USC, its officers, trustees, facility, employees, agents and representatives (hereafter "released parties") from any and all claims which may arise from any cause whatsoever, regardless of the source. The Student further releases and discharges the released parties from responsibility for any accident, illness, negligence, passive or active, or injury or any other consequences arising or resulting directly or indirectly from Student's participation in the Program.

The Student also acknowledges that the USC assumes no responsibility in whole or in part, for any delays, delayed or changed departure or arrival times, fare changes, dishonors of hotel, airline or vehicle rental reservations, missed carrier connections, sickness, disease, injuries (including death), losses, damages, weather, strikes, acts of God, circumstances beyond the control of the USC, force majeure, war quarantine, civil unrest, public health risks, criminal activity, terrorism, expense,
accident, injuries or damage to property, bankruptcies of airlines or other service providers, inconveniences, cessation of operations, mechanical defects, failure or negligence of any nature howsoever caused in connection with any accommodations, restaurant, transportation, or other service or for any substitution of hotels or of common carrier beyond USC's control, with or without notice, for any additional expenses occasioned by any of the foregoing. If due to weather, flight schedules or other uncontrollable factors Student is required to spend additional nights, USC will not be responsible for Student's hotel, transfers, meal costs or other expenses. Student's baggage and personal property are completely at the Student's own risk.

Student hereby represents and warrants that he/she is and will be covered throughout the Program by a policy of comprehensive health and accident insurance which provides coverage for injuries and illnesses that Student sustains or experiences overseas, and, more specifically, in the countries in which Student will be living and/or traveling while on the Program. By Student's signature below, the Student certifies that his/her health insurance policy will adequately cover Student while outside the United States; and, Student absolves USC of all responsibility and liability for any charges, bills and/or expenses Student may incur while he/she is abroad. Student agrees to report to USC's Program directors any physical or mental condition that he/she has which may require special medical attention or accommodation during the Program at least ninety (90) days prior to departure.

Student hereby agrees to indemnify and hold harmless the released parties from any loss or liability whatsoever including reasonable attorneys' fees, caused by any act or omission of Student resulting from Student's participation in the Program.

Student understands and agrees that Student will obey all rules, regulations, and laws of the respective countries to be visited, and all travel regulations, any rules or precautions issued by USC, its representatives or by any associated institutions or organizations or the United States government. Student also understands that in the sole discretion of the Program representative, a violation of the above may result in an immediate expulsion from the Program. USC reserves the right to decline to accept or retain student in the Program at any time should Student's actions or general behavior impede the operation of the Program or the rights or welfare of any person. In such an event, no refund will be made for any remaining portion of the Program.

Student understands and agrees to attend and participate in all excursions that are a part of the Program. Student understands that failure to do so will result in a reduction of grade including the possibility of course failure.

It is understood and agreed that should Student elect to remain overseas at the location of the Program or elsewhere after participation in the Program, Student will cease to be part of the Program. Should Student drop out of the Program voluntarily or involuntarily, Student understands that any relationship between Student and the Program will be terminated thereafter. In both of the foregoing events, this release shall remain in full force and effect.

USC reserves the right in its sole discretion to cancel or suspend the Program for any events or circumstances that may, in USC's determination, place Student at risk of mental, emotional or physical harm or bodily injury, including but not limited to war, political upheaval, riots or other events in or around the location of the Program. USC may rely on travel advisories issued by the U.S. State Department in determining whether to cancel or suspend the Program. USC may cancel or suspend the Program or substitute classes due to low enrollments or unavailability of faculty or facilities.

By signing below, Student represents that he/she is a student in good standing at USC and

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has never had charges brought against him/her before Student Judicial Affairs and Community Standards (SJACS). Student hereby gives Student Affairs the right to access student's records maintained by the Student Judicial Affairs and Community Standards (SJACS), and to provide relevant information from such records to the Faculty/Program Coordinator.

It is understood and agreed that if any provision of this Release or the application thereof is held invalid, the invalidity shall not affect other provisions or applications of this Release which can be given effect without the invalid provisions or applications and to this end the provisions of this Release are declared severable.

This Release shall be construed in accordance with, and governed by, the laws of the State of California. Subject to approval from USC's insurance carrier, any dispute arising from this Release shall be submitted for full and final resolution to arbitration in accordance with the rules promulgated by the American Arbitration Association. The arbitration shall take place in Los Angeles, California.

This Release is the only, sole, entire and complete agreement of the parties relating in any way to the subject matter hereof. No statements, promises or representations have been made by any party to any other, or relied upon, and no consideration has been offered, promised other than as may be expressly provided herein. This Release supersedes any earlier written or oral understanding or agreements between the parties.

Student acknowledges that she/he has read this Release and that she/he understands its meaning and effect.

Date:______________  Student: ________________________________

Date:______________  Parents or Legal Guardian: ____________________________
(If Student is under 18)

Date:______________  USC: ________________________________

Travel Release, June 2013 3
Faculty Recommendation Form
Brazil Maymester Program – 2019
PORT-250 - Cultures of Brazil & Lusophone Africa

Student Name: ___________________________________________

Recommender’s Name: ____________________________ Rec. Phone # ________________

We recognize the demand of this recommendation and appreciate your openness and honesty. Your comments will help us make an appropriate and informed admission decision regarding this student. The comments in the recommendation form should indicate the applicant’s suitability for an overseas Brazil Maymester Program. Thank you for your time in providing a recommendation.

How long have you known this student? ______________________________________

In what capacity? (e.g. teacher, counselor) ______________________________________

What courses have this student taken with you? ______________________________________

Is the student mature enough to spend an intensive three weeks study-tour in Brazil?

☐ Yes ☐ Somewhat ☐ Not able to judge

Please rate student in the following categories. Please use the student’s peers as a comparison group.

Productive participation in discussions: ☐ Below Average ☐ Average ☐ Good ☐ Very good ☐ Excellent (top 5%)
Maturity: ☐ Below Average ☐ Average ☐ Good ☐ Very good ☐ Excellent (top 5%)
Concern for others: ☐ Below Average ☐ Average ☐ Good ☐ Very good ☐ Excellent (top 5%)
Integrity: ☐ Below Average ☐ Average ☐ Good ☐ Very good ☐ Excellent (top 5%)
Motivation: ☐ Below Average ☐ Average ☐ Good ☐ Very good ☐ Excellent (top 5%)

Compared to other students you teach or other college-bound students in your community (if you are not a teacher), please rate the student’s Intellectual curiosity on a scale of 1-10.

1 (very little or none) ☐ 2 3 4 5 6 7 8 9 10 (high)

Please comment on your experience with this student’s contribution to a positive learning environment in the classroom, and dedication. Please add any additional comments you deem important.

______________________________________________________________________________

______________________________________________________________________________

Would you take this student to an intensive 3-weeks overseas Program? ☐ Yes ☐ No

Why not? ____________________________________________

______________________________________________________________________________

Signature (Typed name is this form is considered a signature) ____________________________ Date ________________
Return this form via email (from your USC email account) to: Prof. Ellen Oliveira at eoliveir@usc.edu
Please include the following info. in the Subject line: Brazil Maymester Program: Letter of Rec. for “Student’s name here”
If preferred, you can mail this form to: USC Department of Latin American & Iberian Cultures, THH 156, Los Angeles, CA 90089-0358. Attention to Prof. Oliveira.