Withdrawal Policy: Third-Party Provider Programs

Withdrawal from a third-party provider program must be submitted to UA Study Abroad and consists of:

- Submission of the online Study Abroad Withdrawal Form
- Copy of confirmation of withdrawal from provider

Students who withdraw from a third-party provider program are subject to the refund policy of their chosen program provider. Students are responsible for understanding the withdrawal policy, procedure, timeline, and applicable cancelation fees specified by the provider for their chosen program.

Program Fees and Refunds

All third-party program participants will be charged a non-refundable UA Study Abroad fee that will be placed on their UA Bursar’s Account as follows:

- $600 UA Study Abroad fee (summer programs)
- $1500 UA Study Abroad fee (semester programs)

For CEA, DIS, GAV, BSME, FIE, and IAU programs, the remaining program charges will be posted to the student’s UA Bursar’s Account.

For all other third-party provider programs, students will be billed program charges directly by the provider.

Students are responsible for the non-refundable UA Study Abroad Fee once the third-party provider’s program withdrawal deadline has passed. UA Study Abroad assumes no responsibility for fees incurred as a result of student failure to comply with third-party provider withdrawal and refund policies.

UA Study Abroad strongly advises all study abroad program participants to purchase fully-refundable airline tickets and/or trip cancellation insurance after they are committed to their program to safeguard against losses or penalties related to airfare should a program be cancelled, its dates change, or unforeseen circumstances cause the student to withdraw from the program. **UA Study Abroad assumes no responsibility for such losses or penalties.**

If a participant receiving financial aid withdraws from a study abroad program, the participant must contact the Office of Scholarships and Financial Aid immediately, as withdrawal may affect
the participant’s financial aid eligibility.

I HAVE READ AND I UNDERSTAND THIS STUDY ABROAD WITHDRAWAL AND REFUND POLICY. IT IS MY RESPONSIBILITY TO MAKE THE CONTENTS OF THIS POLICY KNOWN TO THOSE WHO HAVE ANY FINANCIAL RESPONSIBILITY FOR OR ARE OTHERWISE FINANCIALLY INVOLVED IN ANY STUDY ABROAD PROGRAM PAYMENTS (e.g. parents, relatives, financial institutions). I ACKNOWLEDGE THAT I AM SUBJECT TO THE TERMS OUTLINED ABOVE.

Student Name: ______________________________________ Date of Birth: __________________

First           Middle Initial       Last

By signing below, the parent or legal guardian affirms that they understand the language in this document pertains to their child, and that by signing, they are legally responsible for the obligations described in this agreement and agree to be bound by its terms.

Parent/Guardian Name: ________________________________ Relationship: ______________

First          Middle Initial       Last

Signature of Parent: ________________________________ Date: __________________