



Participant Information Form (Information will be kept private) Intercultural Communication (In Cuba)

Travel to: Cuba March 2-9, 20024

All travelers must submit this form upon enrolling in the trip

Applicant's Full Name
Mailing Address
College
Minnesota West 8 digit ID
Normandale Community College 8 digit ID
Other Which one?
□ Not applicable (I do not attend any college)

Primary Phone:	Alternate Phone
Primary Email	Alternate Email
Date of Birth	

Emergency Contacts				
Name	Phone	Relationship to you		
Name	Phone	Relationship to you		

Do you have a current U.S. Passport? Yes□ No□
Travel will be by plane and bus. Significant sitting, standing, walking on various surface types, and the use of stairs will be required.
Do you have any conditions that would hinder travel by these modes? Yes \Box No \Box
Do you require any physical accommodation that we should be aware of? Yes \Box No \Box
How did you first learn about this program?

1: All travelers must be 18 years of age by date of departure.

4: A Passport, Cuba Tourist Visa, and International Health Insurance will be required to enter Cuba. Information will be coming.

All participants must read and sign the Participation Agreement on the reverse side.

^{2:} Travelers may not be enrolled in PSEO during the semester this course is offered.

^{3:} If you are not a U.S. citizen, there may be additional visas that will need to be applied for. Contact the instructor.

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Participant Agreement Intercultural Communication (in Cuba) Travel to: Cuba (March 2-9, 2024)

NAME OF PARTICIPANT:

Please read and check each statement below to signal your understanding and agreement.

I certify that the information provided on reverse is accurate to the best of my knowledge.
I agree to attend all required pre-and post-departure sessions.
I agree to enroll for credit or audit CMST 1120 in Spring 2024 at Minnesota West.
I certify that I will be at least 18 years of age on or before March 2, 2024.
I certify that I will not be enrolled in PSEO during the Spring 2024 semester.
I have read, understand, and accept the expectations described in the Minnesota West Community and Technical College Student Code of Conduct located at <u>www.mnwest.edu.</u>
I have read, understand, and accept the expectations as described in the Minnesota West short- term study away/abroad handbook.
I have read and understand the tour company's cancellation policy and know the ramifications if I choose to withdraw from the tour.
I have read and understand the itinerary with the activity levels. If I have concerns over any activities or physical requirements, I will speak with the tour leader upon enrollment.
If I endanger myself or others, do not meet the expectations of the Student Code of Conduct, or fail to follow course/tour behavioral rules, I understand I will be sent home early from the program at my own expense.
If any should be enacted, I agree to abide by local, college, tour company, and airline policies related to COVID-19 and understand that these policies may change between now and departure.
I understand that photos and/or videos may be taken during this travel event and that Minnesota West or Normandale Community College may include these in and web-based and non-web-based publications associated with the college intended for educational, promotional, fundraising or other related use. If I do not wish to have my likeness voice, identity, or photographic image to be included, I will notify my instructor(s) before departure.
 I understand that by paying the \$150 enrollment fee, I am securing my place in the program and I may lose this deposit and incur cancellation fees if: I am not in good academic standing as of Spring Semester 2024. I am unable to secure required documents if not a current U.S. Citizen. I do not enroll in CMST 1120 in Spring Semester 2024. I do not make payments to Learn from Travel for the program fee by my deadlines. I do not pay tuition and fees to Minnesota West Community & Technical College by the deadlines.
I have read and signed the Tennessen Warning on the next page.

SIGNATURE OF TRAVELER

DATE

Upon enrollment in tour, return participant Information and Agreement Forms by mail, email, or in person to:

Minnesota West - Kent Dahlman IP3496 kent.dahlman@mnwest.edu **Normandale Community College** - Aimee DuBois C3155 aimee.dubois@normandale.edu





MINNESOTA WEST COMMUNITY & TECHNICAL COLLEGE Tennessen Warning

Minnesota West Community and Technical College is asking you to provide information that includes private and/or confidential information under State and Federal law. The college is asking for this information in order to conduct an investigation. This information will be used during the investigation and during the decision-making process. You are not legally required to provide the information the college is requesting, and you may refuse to provide some or all of the information requested. However, the college may be unable to effectively investigate the complaint if you do not provide sufficient information. With some exceptions, unless you consent to further release of private information, access to the

information will be limited to the individuals involved in the investigation. However, federal and state law does authorize release of private information without your consent to:

• other school officials, including faculty within the college, who have legitimate educational interests in the information;

• other schools in which you seek or intend to enroll, or are enrolled, if you are first notified of the release;

• the federal comptroller general or other federal, state or local education officials for purposes of program compliance, audit or evaluation;

• as appropriate in connection with your application for, or receipt of, financial aid;

• the juvenile justice system, if you are a juvenile, and the information is necessary, prior to adjudication, to determine the juvenile justice system's ability to serve you;

• an alleged victim of a crime of violence, if you are the alleged perpetrator of the crime, and the release is of the results of a disciplinary proceeding against you related to the alleged crime;

• your parents, if you parents claim you as a dependent student for tax purposes;

• a court, grand jury, or state or federal agency, if the information is sought with a subpoena;

• an institution engaged in research for an educational institution or agency related to testing, student aid, or improved instruction;

• an accrediting organization in connection with its accrediting functions;

• appropriate persons in connection with an emergency, if necessary to protect your health or safety or the health or safety of others;

• if required by a court order, or permitted by other state or federal law;

• to the subject of the complaint if necessary to resolve this complaint; or in an administrative or court hearing.

I have read the notice regarding information and privacy as set forth above.

Signature

Date