



Last Name: _____ First Name: _____
 IHP Program: _____ Fall 20____ Spring 20____ Academic Year 20____-20____
 Home Institution: _____

Current Contact Information

Please list all addresses at which you will receive mail between now and the start of the program:

Address 1: _____

Dates valid: _____

Address 2: _____

Dates valid: _____

Phone (please specify type): _____

Primary Email: _____

Permanent Contact Information

Address: _____

Phone (please specify type): _____

Alternate Email: _____

Billing Address

Contact Person: _____

Address: _____

Phone (please specify type): _____

Email: _____

Please confirm your acceptance:

I plan to study with the International Honors Program specified above as detailed in my acceptance letter. I will complete all forms and provide the necessary information as detailed in the confirmation materials. Attached below is my non-refundable deposit of \$2,500, which will be applied to my total program charges.

Student Signature Date

Please staple your deposit check to this form. **Make your check payable to World Learning** in U.S. dollars.

Indicate your name, program name, and program semester in the check's "memo" area.

If you have made other arrangements for your deposit, please explain: _____

----- **OR** -----

I am unable to participate in this program offered by IHP.

Student Signature Date

Please indicate your reason for withdrawing from IHP:

- Financial School approval
- Medical Chose another program
- Other (which one and why):

(please explain):

-- Please staple your check here --