The Case/Fisk Exchange Program offers students a unique educational opportunity to experience student life at Case Western Reserve University and Fisk University. The exchange program is designed to allow up to four (4) Fisk undergraduate students to enroll for one semester at Case Western Reserve University. Students participating in the exchange will normally be in their third, fourth or fifth semester of enrollment.

Fisk University will be responsible for selecting students for exchange and will forward all required documentation to Case Western Reserve University. Students chosen by Fisk shall normally be accepted by Case; however, each institution reserves the right to decline admission. Fisk students will register as non-degree, full-time students at Case and will be free to take courses if at an appropriate level and subject to the agreement of the department involved. Each university will inform the other of any departments that have restricted access. Fisk students will be subject to the rules, regulations and discipline of Case Western Reserve University.

Fisk students will pay tuition and room/board costs at their home university. Fisk students studying at Case will receive a Fisk Visiting Student Subsistence Award from Case, if necessary, which will be applied to additional room and board costs at Case. Exchange students are responsible for the following expenditures: travel expenses, course fees (such as fieldwork costs, for which a non-exchange student would also be liable), travel and medical insurance, medical expenses not covered by insurance, textbooks, personal expenses, and all other debts incurred during the course of the exchange period.

Upon completion of the student’s academic period of exchange, Case Western Reserve University will send an official transcript of credits to Fisk University. Fisk University students must authorize the release of their transcripts in writing before leaving Case. Responsibility for the transfer of Case Western Reserve University’s credits rests with Fisk University.

Deadlines: Fall Semester – April 1st
Spring Semester – October 1st

Return completed applications to:

Claudia C. Anderson
Assistant Dean of Undergraduate Studies
Office of Undergraduate Studies
Case Western Reserve University
10900 Euclid Avenue
Cleveland, Ohio 44106-7028

Telephone   (216)368-2928
Fax           (216)368-4718
Email         claudia.anderson@case.edu

Thank you for your interest in the exchange program. We are looking forward to welcoming you to our campus.
CASE WESTERN RESERVE UNIVERSITY/FISK UNIVERSITY
EXCHANGE STUDENT APPLICATION

Please complete this application either by typing or printing your answers. You must also submit hard copies of the following materials:

*A one page essay in which you state the reasons why you wish to participate in the exchange program

*An official transcript from Fisk University

*One faculty recommendation

Part 1: Personal Information

Name ____________________________

Last (Family) First (Given) Middle

ID/SS# ___ ___ - ___ _____ ___ Date of Birth (Month/Day/Year) _____________

Male ___ Female ___ Marital Status: Single ___ Married ___

Country of citizenship: __________________________ Visa Type (if applicable) _________

Permanent Address (home):

_________________________________________________________________________________

_________________________________________________________________________________

Telephone __________ Fax __________ E-mail ____________________

Address during academic year:

_________________________________________________________________________________

_________________________________________________________________________________

Telephone __________ Fax __________ E-mail ____________________

Entrance Term/Year:

Fall ___ Spring ___

(Year) (Year)

Have you ever applied to or attended Case? Yes ___ No ___

If so, indicate semester/year of study Fall ___ Spring ___

(Year) (Year)
Part 2: Current Program

Academic major (field, specialty) ________________________________

Academic Advisor:

Name ___________________________ E-mail ___________________________

Telephone ______________________ Fax _____________________________

Current year of study:

_____ First year  _____ Second year  _____ Third year  _____ Fourth year

Expected date of completion of current program ____________________

Part 3: Planned Program of Study at Case

Please list specific courses in which you wish to enroll. Courses offered at Case are listed at the following website: http://www.cwru.edu/courses/catalog/. Indicate which courses are absolutely necessary and those that are optional.

<table>
<thead>
<tr>
<th>Subject</th>
<th>Course Title</th>
<th>Necessary/Optional</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

My signature below indicates that all information contained in my application is complete, factually correct, and honestly presented.

Applicant Signature ___________________________ Date ________________

Advisor ___________________________ Date ________________