



U.S. UMAP **Application for Membership**

University Mobility
in Asia and the Pacific

7323 Takoma Avenue
Takoma Park, MD 20912
United States of America
Toll Free 1-800-407-4418
Phone & Fax 301-587-6328
www.usumap.org

Information Regarding Applying Institution

Name: _____
Address: _____

Telephone: _____ Telefax: _____
URL: _____

Information Regarding Authorized Officer* Making Application

Name: _____
Title: _____
Address: _____

Telephone: _____ Telefax: _____
Email: _____

** Authorized Officer should sign on reverse side of this form.*

Information Regarding Designated UMAP Contact Person

The UMAP Contact Person is the primary point of contact for all UMAP-related activities.

Name: _____
Title: _____
Address: _____

Telephone: _____ Telefax: _____
Email: _____

Membership Options

Please check the box beside the membership option you electe (select one option only):

Founding Members

Institutions that join U.S. UMAP before June 30, 2004 will considered U.S. UMAP Founding Members and will be eligible to receive one of the following annual membership rates:

	<i>annual fee</i>	<i>plus</i>	<i>fee per participating student</i>
<input type="checkbox"/> Option A:	\$1,000	<i>plus</i>	\$250
<input type="checkbox"/> Option B:	\$2,000	<i>plus</i>	\$0

Note that the membership year for U.S. UMAP runs from July 1 through June 30. Applications for membership are accepted throughout the year. The first U.S. UMAP exchanges will take place during the 2003–2004 academic year. Exchanges can be for either one or two semesters.

Terms of Agreement: Roles and Responsibilities

UMAP institutions in the U.S. and Asia agree to:

- designate a UMAP contact person;
- waive tuition for students exchanged under UMAP auspices;
- evaluate and report the performance of participants;
- recognize work completed overseas and award credit appropriately;
- provide the agreed upon program(s) of study;
- ensure satisfactory living conditions;
- provide appropriate health care, counseling and other support services;
- receive, if requested, a UMAP student within two years of sending one;
- provide an appropriate orientation for students sent and received; and
- promote UMAP to students, faculty and staff.

By signing this form I agree, on behalf of my institution, to conform to the guidelines for UMAP participation as set out above:

Authorized Officer's Signature

Title

Date

Applicants should enclose two copies of their catalog and view book with their application.

Please mail these materials to:

U.S. UMAP
7323 Takoma Avenue
Takoma Park, MD 20912