

Jerusalem University College

Short-Term Studies

Individual Student Application
for students from
Non-Associated Schools

Download Version



Questions:

- 1) Submit your questions using the information request submission form on this website. OR
 - 2) E-mail the admissions dept. at admissions@juc.edu OR
 - 3) If you are a North American, you may call our North American Office at 1-800-891-9408 or 1-815-229-5900.
- All other applicants please call our Jerusalem Office at 972-2-671-8628 (Note: you must dial your international long distance operator number first.)

SHORT-TERM STUDIES

Individual Application for Students from Non-Associated Schools

RETURN THE COMPLETED PACKAGE TO:

Jerusalem University College

Office of Admissions
1185 Wesley Avenue
Xenia, OH 45385

- Program:** A The Geographical and Historical Settings of the Bible (*four semester hours of credit*)
 B Jesus and His Times (*two semester hours of credit*)
 B Paul and Hellenistic World (*two semester hours of credit*)
 B Qumran - Discoveries in the Dead Sea Scrolls (*two semester hours of credit*)
 C Pastor - Parishioner Study Tour (*housing is hotel accommodations only*)
 D Archaeology: Field Excavation (*semester hours of credit to be arranged*)

- Housing:** On-campus dormitory (not available for program C). Dorm housing is available on a first come basis. After dorms are filled, additional participants requesting dorm housing will be placed in hotels at the hotel rate.
 Hotel - double occupancy (additional fee, except for Program C)
 Hotel - private room (additional fee)

- Option:** Jordan field trip optional excursion following program A only (additional fee)

Arrival Date in Israel (published schedule): _____ Departure Date from Israel (published schedule): _____

PERSONAL INFORMATION

Name (Dr./Rev./Mr./Mrs./Miss/Ms.) _____
(Please Circle one) Family name First name Middle name

Mailing Address _____
Street or Box City State Postal Code Country

Telephone: home _____ work _____ Fax: _____

E-Mail: _____ DOB: (mo/dy/yr) _____ Current School: _____

Denominational Affiliation: _____ Occupation: _____

Male Female Citizen/Passport of what country? _____

Passport Nu: _____ Issue Date: (mo/dy/yr) _____ Expiration Date: (mo/dy/yr) _____

Marital Status: Single Married Social Security # (U.S. citizens only) _____

Family Members Accompanying You: Spouse Children (give ages please) _____

In case of an emergency, notify: _____
Name Address Phone number

ACADEMIC BACKGROUND: Three Post-Secondary Schools Most Recently Attended

<u>Name of School</u>	<u>Dates Attended</u>	<u>Major/Minor</u>	<u>Degree Granted</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

An official copy of the applicant's transcript from the school in which he/she is currently enrolled, or from the last school from which he/she received a degree, or last school attended (only if not currently enrolled as a student), must accompany this application.

FEES TO ACCOMPANY THIS APPLICATION (total required is \$215.00 for Programs A or C, \$193.00 for Jesus and His Times, \$150 for all others)

1. Application Fee- \$50.00 (US), **non-refundable**
2. Tuition Deposit- \$100.00 (US), refundable only to those not accepted into the program OR for those cancelling up to 30 days prior to semester start. (applicable to total fees)
3. Materials- \$65.00 (US), **non-refundable**. (required for programs A and C).
4. Materials- \$43.00 (US), **non-refundable**. (required for Jesus and His Times program)

APPLICATION PROCEDURE

1. Complete the application form, Health Statement, the waiver of responsibility, transcripts, and enclose any necessary fees.
2. Mail the sealed envelope to the Admissions Office, Jerusalem University College (see above address).

EXPECTATIONS AND GOALS

In the space provided below, please write a short essay detailing why you desire to study at Jerusalem University College, and how you expect your studies at the university to benefit your future vocational and/or spiritual goals. Please be as specific as possible.

PLEASE NOTE: This application will only be processed when the complete application package is received by the Office of Admissions of Jerusalem University College. This includes all fees, transcripts, and all portions of this form. *No partial application will be processed.* **Also note** that while all complete applications will be processed regardless of the date received, you should complete the process 3 months prior to the program start date desired. The university will promptly process them and inform the applicant of the decision. Those applicants requiring a visa (those not on the accompanying list) must apply for a visa at the closest Israeli consulate after receiving acceptance into the program.

I hereby certify that, to the best of my knowledge, the information contained in this application is complete and correct. I understand that in the event any of the information provided by me in this application is determined to be incorrect, the university has the right to sever immediately its relationship with me.

Date _____	Student Signature _____	FOR OFFICE USE ONLY
<input type="checkbox"/> Application form completed		Comments:
<input type="checkbox"/> Application fee included		
<input type="checkbox"/> Deposit included		
<input type="checkbox"/> Materials Fee		
<input type="checkbox"/> Transcripts		
<input type="checkbox"/> Medical Report and Statements and Agreements completed and signed		
	Decision: _____	Date: _____

STATEMENTS AND AGREEMENTS

Part A: Statement of Standards

Jerusalem University College strives to cultivate an enriched understanding of the Christian faith through a first-hand encounter with the Land, involving the language, history, and culture associated with Scriptures. It makes use of the unique resources available in Israel to fashion an education of high quality.

The Jewish and Arab cultures here differ from one another and are quite different from the Western culture of which many incoming students are a part. While the nonreligious segment of the Jewish culture has similarities with the Western culture, the Arab people—both Muslim and Christian—have very different values and norms of behavior.

In recent years the social culture in the Western world has changed so rapidly that the behavior of some students coming to the university has been detrimental to the ongoing Christian witness JUC seeks to maintain with the Jewish and Arab peoples (including those on the Institute staff). For this reason we ask that you endeavor to understand the position of the Institute in this country and agree to abide by the following university standards.

Because of the cultural mores, particularly within the Arab population, a dress standard is observed. Short shorts may not be worn at any time. Mid-thigh and walking shorts are acceptable on field trips. Slacks are generally acceptable everywhere. You represent the Institute while you are here; how you look becomes how *we* are viewed in the eyes of the community.

The Arab community does not have the equivalent of the word “dating” in its vocabulary. When a woman is seen with a man, it may be assumed that, if they are not married, they may be living together; therefore, the woman (unmarried) would be considered a “promiscuous woman.” With this in mind, students must be cautious in their physical contact with each other. This includes engaged couples and married couples.

With a 50+ year history of maintaining an evangelical Christian witness in this culture, we find it necessary to uphold these standards of conduct.

Agreement: I have read the above Statement of Standards and understand that I will be living in Israel under the auspices of the Jerusalem University College. I also understand the Christian frame of reference in which I will be living. Should I abuse my relationship to the university, I realize that the university has the responsibility and the authority to sever this relationship and to arrange for my return to my country, at my expense. I also understand that as well as being subject to the rules and regulations of Jerusalem University College, I am subject to the rules and regulations of my home institution (if I am currently enrolled elsewhere). I, therefore, agree to strive to the best of my judgment to fit into life at the university and to be a responsible participant in the program to which I am admitted.

PLEASE INITIAL HERE YOUR AGREEMENT WITH PART A

Part B: Disclosure Statement

Travel invariably has its hazards, especially in countries where standards of health care, sanitation, public safety and similar situations differ from those in your home country. Other complications you may encounter are changes in language, customs, culture and laws.

Jerusalem University College makes every effort to avoid unnecessary risk by trying to control travel, food service, and sanitation. The university has operated for over 40 years in the Middle East and has had few incidents and no major problems. However, the educational experience requires that we travel in the countryside where physical exertion (this is a strenuous program) and exposure to the culture are common. You should understand that this study and associated travel can be undertaken solely at your own risk.

The university is a non-profit educational institution with few assets and minimal insurance. It is essential that you have health insurance while in Israel. Hospitals will not treat a patient without proof of credit card or cash. All hospital bills in Israel must be paid in full before the patient is discharged; therefore, you must do the following:

1. Obtain an insurance policy in your home country which will cover you while in Israel. Please contact your local carrier to be certain just where you stand in regard to health, accident, travel, and life insurance and what may be required. You should plan on bringing contingency funds to pay by credit card or cash should an emergency arise. A claim may then be filed with your insurance company for reimbursement of the fees.

This disclosure is written to make you aware of these facts. Should you have specific questions concerning any aspect of the program, please feel free to contact our offices in Rockford, Illinois, or Jerusalem.

Agreement: I have read the Disclosure Statement, and I understand and accept my medical responsibilities and verify that I have appropriate insurance coverage. I empower Jerusalem University College, in emergency situations, to assign me for medical treatment, even if such treatment is beyond my insurance coverage in Israel, including hospitalization (at my expense) if such is determined necessary by a medical doctor, and to return me to my home for medical treatment (also at my expense) if circumstances warrant.

PLEASE INITIAL HERE YOUR AGREEMENT WITH PART B

Part C: Waiver of Responsibility

I will hold Jerusalem University College and its directors, employees, their families and heirs blameless in the event of cancellation or changes in travel and program schedules, or adjustment in announced fees caused by changes in air tariffs, lodging rates, or fares by those engaged for such services.

I release Jerusalem University College and its directors, employees, their families and heirs from claims of any nature incurred by me before, during or after my time in the Middle East, and from claims arising from any act involving any person, agent, or entity not a part of the university. I agree that, in the event of war (declared or undeclared), strike, terrorism, act of God, or emergency not under the control of the Jerusalem University College, any refund will be determined by the university on an individual basis and at the university's discretion.

Agreement: I have read this Waiver of Responsibility, understand its content, and accept the risks discussed. I hereby verify that good health allows me to take part in the university's program (including hiking, bus travel, etc.), and I absolve the university of responsibility for me in the above stated areas. Furthermore, by my signature below I acknowledge that I have read both the Statement of Standards and the Disclosure Statement and agree to abide by the conditions set out in them.

PLEASE INITIAL HERE YOUR AGREEMENT WITH PART C

Signature: _____

Date: _____

Signature of Witness: _____

Date: _____

REQUIRED HEALTH STATEMENT - PART I

Please indicate past AND present illnesses or conditions:

Allergies _____	Hepatitis _____	Paralysis _____
Amoebic dysentery _____	*Hypertension _____	Pneumonia _____
*Asthma _____	Hypoglycemia _____	Rheumatic fever _____
*Diabetes _____	Infectious mononucleosis _____	Tuberculosis _____
*Epilepsy _____	*Kidney trouble _____	Ulcers _____
*Foot/leg difficulties _____	*Pregnancy _____	Other _____
*Gastro-intestinal _____	Malaria _____	HEIGHT: _____
*Heart _____	Migraine headache _____	WEIGHT: _____

*Have you been treated in the last three years for any mental or emotional condition? _____

*Are you currently on any drug for treatment of mental or emotional condition? _____

*If your answer is yes to either of the above, please give a brief explanation and also the name, address and phone number of your physician or counselor for reference. _____

To the best of my knowledge, the above information is complete and correct.

_____ Date

_____ Signature

PART II of the HEALTH STATEMENT is REQUIRED to be COMPLETED BY A PHYSICIAN if: a) you have had any of the illnesses marked with an asterisk (*) in the above Health Statement; OR b) you are 50 years of age or older.

HEALTH STATEMENT - PART II
PHYSICAL EXAMINATION FORM - (Physician)

To be completed if applicant: a) is 50 years of age or more; or b) has had any of the illnesses or conditions marked with an asterisk (*) in the **REQUIRED HEALTH STATEMENT - PART I**. *Please print or use computer.*

Dear Doctor: This applicant is applying for a period of study in Israel. **FACILITIES HERE INVOLVE MUCH STAIR CLIMBING and our program includes SUSTAINED HIKING OVER RUGGED AND ROCKY TERRAIN. THIS IS A VERY STRENUOUS PROGRAM.** Please bear this in mind when making your recommendations.

Name of Applicant: _____
 Height: _____ Weight: _____ Blood Pressure: _____ Pulse: _____

PHYSICAL STAMINA: _____ Excellent _____ Good _____ Average _____ Fair _____ Poor

Vision: Normal _____ Abnormal _____	Back: Normal _____ Abnormal _____
Hearing: Normal _____ Abnormal _____	Feet: Normal _____ Abnormal _____
Heart: Normal _____ Abnormal _____	Legs: Normal _____ Abnormal _____
Lungs: Normal _____ Abnormal _____	Neurological: Normal _____ Abnormal _____
Abdomen: Normal _____ Abnormal _____	Emotional Stability: Normal _____ Abnormal _____
Menstrual: Normal _____ Abnormal _____	

LAB WORK: If indicated

Hemoglobin _____
 Urine (routine) _____
 W.B.C. _____
 Other _____

PHYSICAL ACTIVITY:

Restricted _____ Unrestricted _____
 Duration _____
 Reason for restriction _____

If not covered in the above, please specify the names of the injury, illness, or mental disorder for which the applicant has been under observation or has had medical or surgical advice or treatment or has been hospitalized. Please give dates of the duration of illness or disorder and the treatment/medications; and give final results. Specify "none" if the answer is negative.

Recommendations: _____

I have examined the above-named applicant whom I have known since _____

From my knowledge of his/her medical history, and as a result of my examination of him/her, it is my opinion that he/she is in good health mentally, emotionally, and physically and that he/she will be able to pursue a full course of study involving **STRENUOUS, SUSTAINED HIKING OFTEN OVER OVER RUGGED AND ROCKY TERRAIN**, and **SIGNIFICANT STAIR CLIMBING**, at our overseas institution.

Date of physical examination _____, 20 _____

Please Print: Doctor's name _____
 Address _____
 City, State, Zip _____
 Area Code and Telephone Number: _____
 Doctor's Signature _____

CITIZENS FROM THE FOLLOWING COUNTRIES ARE EXEMPT FROM OBTAINING VISAS PRIOR TO ENTERING ISRAEL¹: Citizens of countries not on the following lists must obtain visas prior to entry to Israel. Students requiring visas should contact the closest Israeli embassy and apply through them for their visa. All students must have a passport which is valid for at least 6 months after your departure date.

EUROPE

Andora
Austria
Belgium
Bulgaria
Croatia
Czech Republic
Cyprus
Denmark
Estonia
Finland
France
Germany (persons born after 1/1/28)
Gibraltar
Great Britain
Greece
Holy Vatican
Hungary
Iceland
Ireland
Italy
Latvia
Liechtenstein
Lithuania
Luxemburg
Malta
Monaco
Norway
Poland
Portugal
San Marino
Slovakia
Slovenia
Spain
Sweden
Switzerland
The Netherlands

AFRICA

Losoto
Malawi
Mauritius
South Africa
Swaziland

ASIA & OCEANA

Australia
Fiji Islands
Japan
Hong Kong
Mongolia
New Zealand
Singapore
South Korea
The Philippines
Vanuatu

THE AMERICAS

Argentina
Barbados
Bolivia
Brazil
Canada
Chile
Columbia
Costa Rica
Dominica
El Salvador
Ecuador
Grenada
Guatemala
Haiti
Jamaica
Mexico
Panama
Paraguay
St. Kitts & Nevis
St. Lucia
St. Vincent and the Grenadines
Surinam
Trinidad & Tobago
The Bahamas
The Dominican Republic
Uruguay
United States

¹ As published by the Ministry of Tourism, July, 18, 2007. Jerusalem University College is not responsible for errors related to this list.

**PLEASE COPY AS NEEDED
FOR EACH INDIVIDUAL IN YOUR GROUP**

ADDITIONAL INFORMATION

Please complete the following information about your present place of worship and return with your application form.

Church Name _____

Denomination _____

Pastor's Name _____

Church Address _____

Church Telephone _____

Your Name _____

Thank You

