SMU-IN-TAOS

APPLICATION REQUIREMENTS & PROCEDURES

Admission to the SMU-IN-TAOS program is open to students who have maintained a minimum grade point average of 2.7 **and whose application is approved by the Student Life office**. Once the Taos program has received approval of the application, students will then be notified of their acceptance. Admission is very competitive, so students must meet all stated requirements. Please discuss your course selection with your academic adviser to assure the program meets your academic requirements.

FORMS & ATTACHMENTS

A Students Data Form, Emergency Medical Treatment Consent Form, Release of Liability Waiver and an unofficial University Transcript are required. All forms must be completely filled out, signed and received by the SMU-IN-TAOS Office for an application to be considered. Incomplete applications will be held until the term admission deadline. **If incomplete at that time, the application will be void.**

- ☐ **Student Data Form**: contains all relevant biographic and demographic data. All questions must be answered fully; please give local addresses, local telephone numbers and a current email address.
- ☐ **Emergency Medical Treatment Consent Form**: this form provides us with all necessary medical information. The form requires a Notary Public signature and stamp to verify your identity and signature. Notary services are available in the SMU-IN-TAOS Office with valid picture identification.
- ☐ **Release of Liability Form**: please read carefully and sign where noted.
- ☐ **Transcript**: an unofficial transcript of your academic record must be included with your application. The transcript does not have to be official – a printout of your access.smu records will be satisfactory.
- ☐ **Housing and Dining Request Form:** Please fill this out to provide information on housing and food preferences

Application documents should be completely filled out and returned via mail to SMU-IN-TAOS, PO Box 750145, Dallas, TX 75275-0145; alternatively, applications may be delivered to our physical location, SMU-IN-TAOS, Blanton Building, 6185 Airline Suite 338, Dallas, TX 75205. Forms are available online at smu.edu/taos.

TERM INFORMATION

SMU-IN-TAOS holds three summer semester programs: May Term, June (Summer 1) and August Term. Each term offers an opportunity for students to study and live in an engaging natural environment unlike that found on the main campus. While the program strives to make general education courses available each semester, the program also offers opportunities for directed study. Please refer to the most recent course listing for specific information.

Course enrollment is limited due to housing constraints. GPA and class year will be taken into consideration in the event that the number of applicants exceeds the program's maximum enrollment capacity. It is in your best interest to list several courses on your application as classes can fill quickly. June (Summer 1) and August Term admissions operate on a rolling basis therefore course preference and scholarships are awarded to early applicants.

FRIENDS OF TAOS ASSISTANCE SCHOLARSHIPS

A limited number of tuition assistance scholarships are available to full-time SMU undergraduates who plan to study at SMU-IN-TAOS during May Term. Preference is given to students taking courses in June (Summer 1) Term and August Term. Awards apply only to Taos tuition costs. Room, board, course fees, and transportation are the responsibility of the students. The deadline for applying for a Friends of Taos Tuition Scholarship is the same deadline for course applications set for each summer term. Award notifications will be emailed two weeks after the application deadline. Upon acceptance of the tuition award, the awarded monetary amount will be credited to individual student accounts.

SMU-IN-TAOS

DEADLINES SUMMER 2014

MAY TERM

Application & Scholarship Deadline	March 3
Admissions Decisions (email)	March 17
Course Request Form Pick-up	March 17-28
Return Course Forms with advisor approval	March 28
Payment Deadline	May 2

JUNE (SUMMER I), MINI-JUNE and AUGUST TERMS

Priority Application Deadline:	April 14
Scholarship Forms Due	April 14
June Payment Deadline	May 23
August Payment Deadline	July 11

Students applying before the Priority Application Deadline are given preference in course selection and scholarship opportunities. Applications are accepted before and after the deadline on a rolling basis until courses fill, but early application increases one's chances of getting a first choice in courses.

REGISTRATION PROCEDURE

Upon acceptance to the program, a Student Course Request Form must be picked up from the SMU-IN-TAOS Office and signed by your academic adviser. Signed Course Request Forms should be returned to the SMU-IN-TAOS by the above noted deadline. We cannot accept payment in the SMU in Taos office. All students will be notified of registration by the SMU-IN-TAOS Office. **Make sure to meet all listed deadlines to retain your spot in the SMU-IN-TAOS Program.**

ADDITIONAL INFORMATION

Student Information packets with additional program information will be distributed when Course Request Forms are picked up. The packet will provide travel suggestions, packing guidelines, and campus rules and regulations.

Please feel free to contact us should you have additional questions about the SMU-IN-TAOS Program.

Mailing Address:
SMU-IN-TAOS
PO Box 750145
Dallas, TX 75275-0145
214-768-3657

Physical Address:
SMU-IN-TAOS
Blanton Building
6185 Airline Suite 338
Dallas, TX 75205

We look forward to meeting you,

Mike Adler, Ph.D.
Executive Director
SMU-IN-TAOS
madler@smu.edu
214-768-1864

Anna Bland Aston
Director of Operations and Finance
SMU-IN-TAOS
aaston@smu.edu
214-768-3771

Southern Methodist University will not discriminate in any employment practice, education program or educational activity on the basis of race, color, religion, national origin, sex, age, disability, or veteran status. SMU's commitment to equal opportunity includes nondiscrimination on the basis of sexual orientation. The Director of Access and Equity has been designated to handle inquiries regarding the nondiscrimination policies and may be contacted at Southern Methodist University, Dallas TX 75225; 214-768-3601.

SMU-IN-TAOS

DR ___/___/_____ □ N □ FOT □ AS

STUDENT DATA (Please print clearly)

Indicate term applying for: MAY JUNE (Summer I) MINI-JUNE AUGUST

Name: _____

SMU ID #: _____ Date of Birth: ____/____/_____ Sex: □ M □ F

Local Tel: (_____) _____ - _____ Email: _____

Local Address: _____

City/State/ZIP: _____

Parent/Legal Guardian Name: _____ Tel: (_____) _____ - _____

Parent/Legal Guardian Address: _____

City/State/ZIP: _____

College/University Currently Attending: _____

Current Academic Classification (circle one): 1ST Year 2ND Year Junior Senior Graduate

Anticipated Graduation Date: Month _____ Year _____

How do the courses listed below fit into your degree program? □ GEC/UC Req □ Elective □ Major □ Minor

Major(s): _____ _____ GPA: _____

Minor(s): _____ Advisor: _____

I wish to apply for (list courses in order of preference):

Course Abbreviation/Number	Term	Course Title
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

Are you currently on academic probation? □ YES □ NO

List any Honor Code Violations/Judicial Code Violations below; give dates and specifics: _____

_____

List any academic honors you have received: _____

How did you learn of SMU-IN-TAOS? _____

I certify that the information provided on this application form is correct to the best of my knowledge. I am aware that if I become a student in the SMU-IN-TAOS program that I will comply with all rules, regulations, and instructions for student behavior. I have read and agree to comply with all financial policies, requirements, and procedures necessitated by the program. I also understand that SMU-IN-TAOS has the right to require my withdrawal from the program for unsatisfactory academic work or behavior between the time of application and conclusion of the program. I also permit SMU-IN-TAOS to use photographs, in whole or part, for the purpose of publication and/or advertisement.

Signature of Applicant _____ Date _____

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SMU-IN-TAOS

FINANCIAL POLICY

Print Applicant Name_____ **SMU ID#** _____

Tuition & Fee Schedule for Cancellation/Withdrawal

A student who officially cancels his or her enrollment or withdraws from the University is charged only a portion of tuition and fees based on the effective date of the cancellation/withdrawal. Please refer to the following term schedule:

May Interterm, Summer Term (June), Mini-June and August Interterm

	Portion Returned
Prior to 1st day of term	100%
On or after 1st day of term	0%

Room & Board Schedule for Cancellation/Withdrawal Policy

A student must cancel/withdraw from the Taos Program 14 calendar days prior to 1st day of term in order to receive a full room and board refund. No refunds will be granted after this date.

May Interterm, Summer Term (June), August Interterm

	Portion Returned
On or prior to 14 days before 1st day of term	100%
After 14 days before 1st day of term	0%

All cancellation/withdrawal notifications must be in writing and delivered to the SMU-IN-TAOS Office. The effective date of the cancellation/withdrawal will be the date the written notice is received in the SMU-IN-TAOS Office.

I have read and agree to abide by the above stated policies and all policies in effect on the SMU-IN-TAOS, Fort Burgwin campus. I agree to keep the SMU-IN-TAOS Office informed of any changes that might affect my attendance at Fort Burgwin.

Signature of Applicant _____ **Date** _____

SMU-IN-TAOS

EMERGENCY MEDICAL TREATMENT CONSENT FORM

PRINTED NAME: _____ DOB: ___/___/_____

Health Insurance Provider: _____ Policy/Group No: _____

Identify all allergies (foods, drugs, insect bites, dust, etc.) and the nature of allergic reaction:

_____

_____

List all medications currently being taken and the reason for use:

_____

_____

Emergency Contact: _____ Relationship: _____

Cell: (_____) _____ - _____ Home: (_____) _____ - _____ Other: (_____) _____ - _____

NOTE: If religious or other considerations prevent your authorization for necessary emergency medical treatment, you must provide a signed statement, sworn before a person authorized by law to give oaths or affirmations, releasing Southern Methodist University and its alternate campus, Fort Burgwin, Taos County, New Mexico, (SMU-IN-TAOS), its Trustees, officers, employees, agents, assigns and legal representatives from any liability resulting from your refusal to allow emergency medical treatment for any injury which may occur as a result of your participation in SMU-IN-TAOS. If you are under 18 years of age, the sworn statement must be signed by your parent or legal guardian.

……

Your signature below indicates your consent for emergency medical treatment. Please note that the SMU-IN-TAOS staff are not trained medical professionals and may not be able to render aid if a serious accident or illness occurs.

STUDENT SIGNATURE (IF STUDENT IS 18 YEARS OF AGE OR OLDER)

I hereby authorize Mike Adler or faculty/staff advisers to provide, at my expense, any and all necessary emergency medical care required for me while in the SMU-IN-TAOS program, Summer _____ (year).

This authorization □ DOES □ DOES NOT authorize blood or blood products to be provided.

Signature: _____ Printed Name: _____

**Sign in the presence of a notary public. **

PARENT/LEGAL GUARDIAN SIGNATURE (IF STUDENT IS UNDER 18 YEARS OF AGE)

I hereby authorize Mike Adler or faculty/staff advisers to provide, at my expense, any and all necessary emergency medical care required for me while in the SMU-IN-TAOS program, Summer _____ (year).

This authorization □ does □ does not authorize blood or blood products to be provided.

Signature: _____ Printed Name: _____

**Sign in the presence of a notary public. **

NOTARY PUBLIC AFFIRMATION (Notary Public services available in the Taos Office)

The state of _____ County _____

Before me (name and title of affirming officer) _____

On this day personally appeared _____ known to me through _____

(description of identity card) to be the person whose name is subscribed to the foregoing instrument and

acknowledged that he/she executed the same for the purposes and consideration therein expressed. Given under

my hand and seal of office this _____ day of _____, AD _____.

(SEAL/STAMP)

RELEASE OF LIABILITY: READ VERY CAREFULLY BEFORE SIGNING

STUDENT SIGNATURE (IF STUDENT IS 18 YEARS OF AGE OR OLDER)

I, _____, a student at the Southern Methodist University ("SMU") Fort Burgwin Campus, Taos County, New Mexico ("SMU-IN-TAOS"), hereby acknowledge that I have freely and voluntarily enrolled in the courses and activities at SMU-IN-TAOS during the summer of _____ (year). I understand and agree that the SMU-IN-TAOS (the "Program") structure is designed to enhance my educational experience, and that I participate at my own risk. In consideration for SMU allowing me to enroll in the Program and providing me the opportunity to enhance my educational experience, I hereby execute this Release of Liability with the intent to bind myself, my spouse (if applicable), my heirs, assigns, legal representatives, and any other person claiming under or through me. I further represent that I am at least 18 years of age and competent to sign this affirmation and release. I understand that I must provide my own transportation to and from SMU-IN-TAOS, or if transportation is arranged for me by a faculty member of SMU-IN-TAOS, I accept the same voluntarily and completely at my own risk, understanding that I am not required to accept such transportation and that I may arrange alternate transportation without adversely affecting my performance in the Program. I also understand that if I provide my own transportation during my stay at SMU-IN-TAOS, I must provide automobile collision and liability insurance, at my expense, and that such transportation will not be covered by any insurance policy owned by SMU. I understand and agree that by participating in the Program, I face risks of accidental and/or other physical or emotional injury. These risks may include, but are not limited to, (1) loss or damage to personal property, (2) injury or fatality due to (a) travel to and from SMU-IN-TAOS and throughout the Program, (b) the condition of the facilities at SMU-IN-TAOS, and/or (c) the condition of the facilities in which the Program will take place, (3) physical exertion and heat exhaustion, (4) inclement weather, (5) high altitude, (6) animal or insect bites, (7) dehydration, (8) exposure to outdoor terrain and all the risks inherent therein, including slips, falls and falling objects, and (9) suffering illness or injury in a remote area without easy access to medical facilities, among others. I understand and assume all risks of my participation in SMU-IN-TAOS and the Program. I further represent that I have made SMU-IN-TAOS organizers aware of any and all physical or mental disabilities which might limit my participation in Program activities and have received an offer of reasonable accommodations as needed. I will advise the SMU-IN-TAOS adviser(s) at any point when I question my ability to participate in SMU-IN-TAOS and/or the Program. I EXPRESSLY AGREE AND INTEND THAT MY PARTICIPATION IN ALL PROGRAM ACTIVITES AND USE OF ALL FACILITIES AT SMU-IN-TAOS SHALL BE UNDERTAKEN BY ME AT MY OWN RISK AND THAT NEITHER SMU, ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS NOR ASSIGNS SHALL BE LIABLE FOR ANY INJURIES, DAMAGES, CLAIMS, DEMANDS, ACTIONS OR CAUSES OF ACTION WHATSOEVER WHICH MAY ARISE OUT OF OR IN CONNECTION WITH MY PARTICIPATION IN THE PROGRAM, WHETHER FROM ACTS OF ACTIVE OR PASSIVE NEGLIGENCE ON MY PART, OR THE PART OF SMU-IN-TAOS AND SMU, ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS AND ASSIGNS, AND I DO HEREBY AGREE TO FOREVER RELEASE, DISCHARGE, INDEMNIFY, HOLD HARMLESS AND DEFEND SMU-IN-TAOS, SMU, ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS AND ASSIGNS FOR ANY SUCH INJURIES, DAMAGES, CLAIMS, DEMANDS, ACTIONS OR CAUSES OF ACTION, COUNSEL TO BE CHOSEN BY SMU. The terms of this Release of Liability are to be governed by and construed under the laws of the State of Texas. In the event any term or provision of this Release of Liability is found to be unenforceable or void, in whole or part, the term or provision concerned shall be construed as valid and enforceable to the maximum extent permitted by law, and the balance of this Release of Liability shall remain in full force and effect. I agree that exclusive venue for any dispute arising between SMU and me involving this Release of Liability in any way shall be in Dallas County, Texas.

ACCEPTED AND AGREED:

By: (SIGNATURE) _____ Date: _____

PARENT/LEGAL GUARDIAN SIGNATURE (IF STUDENT IS UNDER 18 YEARS OF AGE)

I, _____, the parent/guardian of _____ ("my child"), a student at the Southern Methodist University ("SMU") Fort Burgwin Campus, Taos County, New Mexico ("SMU-IN-TAOS"), hereby acknowledge that my child has freely and voluntarily enrolled in the courses and activities at SMU-IN-TAOS during the summer of _____ (year). I understand and agree that the SMU-IN-TAOS (the "Program") structure is designed to enhance my child's educational experience, and that my child participates at his/her own risk. In consideration for SMU allowing my child to enroll in the Program and provide my child the opportunity to enhance his/her educational experience, I hereby execute this Release of Liability with the intent to bind myself, my spouse (if applicable), my child, my heirs, assigns, legal representatives, and any other person claiming under or through me. I further represent that I am at least 18 years of age and competent to sign this affirmation and release. My child understands that he/she must provide his/her own transportation to and from SMU-IN-TAOS, or if transportation is arranged for my child by a faculty member of SMU-IN-TAOS, my child accepts the same voluntarily and completely at his/her own risk, understanding that my child is not required to accept such transportation and that I may arrange alternate transportation without adversely affecting my child's performance in the Program. My child also understands that if he/she provides his/her own transportation during their stay at SMU-IN-TAOS, he/she must provide automobile collision and liability insurance, at his/her expense, and that such transportation will not be covered by any insurance policy owned by SMU. My child understands and agrees that by participating in the Program, he/she faces risks of accidental and/or other physical or emotional injury. These risks may include, but are not limited to, (1) loss or damage to personal property, (2) injury or fatality due to (a) travel to and from SMU-IN-TAOS and throughout the Program, (b) the condition of the facilities at SMU-IN-TAOS, and/or (c) the condition of the facilities in which the Program will take place, (3) physical exertion and heat exhaustion, (4) inclement weather, (5) high altitude, (6) animal or insect bites, (7) dehydration, (8) exposure to outdoor terrain and all the risks inherent therein, including slips, falls and falling objects, and (9) suffering illness or injury in a remote area without easy access to medical facilities, among others. My child understands and assumes all risks of participation in SMU-IN-TAOS and the Program. My child further represents that he/she has made SMU-IN-TAOS organizers aware of any and all physical or mental disabilities which might limit his/her participation in Program activities and have received an offer of reasonable accommodations as needed. My child will advise the SMU-IN-TAOS adviser(s) at any point when he/she questions his/her ability to participate in SMU-IN-TAOS and/or the Program. MY CHILD EXPRESSLY AGREES AND INTENDS THAT HIS/HER PARTICIPATION IN ALL PROGRAM ACTIVITES AND USE OF ALL FACILITIES AT SMU-IN-TAOS SHALL BE UNDERTAKEN BY MY CHILD AT HIS/HER OWN RISK AND THAT NEITHER SMU, ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS NOR ASSIGNS SHALL BE LIABLE FOR ANY INJURIES, DAMAGES, CLAIMS, DEMANDS, ACTIONS OR CAUSES OF ACTION WHATSOEVER WHICH MAY ARISE OUT OF OR IN CONNECTION WITH MY CHILD'S PARTICIPATION IN THE PROGRAM, WHETHER FROM ACTS OF ACTIVE OR PASSIVE NEGLIGENCE ON MY CHILD'S PART, OR THE PART OF SMU-IN-TAOS AND SMU, ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS AND ASSIGNS, AND MY CHILD DOES HEREBY AGREE TO FOREVER RELEASE, DISCHARGE, INDEMNIFY, HOLD HARMLESS AND DEFEND SMU-IN-TAOS, SMU, ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS AND ASSIGNS FOR ANY SUCH INJURIES, DAMAGES, CLAIMS, DEMANDS, ACTIONS OR CAUSES OF ACTION, COUNSEL TO BE CHOSEN BY SMU. The terms of this Release of Liability are to be governed by and construed under the laws of the State of Texas. In the event any term or provision of this Release of Liability is found to be unenforceable or void, in whole or part, the term or provision concerned shall be construed as valid and enforceable to the maximum extent permitted by law, and the balance of this Release of Liability shall remain in full force and effect. My child and I agree that exclusive venue for any dispute arising between SMU and me or my child involving this Release of Liability in any way shall be in Dallas County, Texas.

ACCEPTED AND AGREED:

By: (SIGNATURE) _____ Date: _____

SMU-IN-TAOS

HOUSING & DINING REQUEST FORM

PRINT NAME _____ ID# _____ ○ Female ○ Male

TERM: ☐ MAY ☐ JUNE (Summer I) ☐ MINI-JUNE ☐ AUGUST ☐ J TERM

COURSE(S) _____ _____

HOUSING INFORMATION: Please indicate your choice of a Semi-private or Group Casita.

○ **Semi-private Casita** (3 students per semi-private room) Please list first & last names of roommate(s) requested

_____

_____

○ **Group Casita** (9 students to a group room) Please list first & last names of roommate(s) requested

_____ _____

_____ _____

_____ _____

_____ _____

*** NOTE: The SMU-IN-TAOS program will do its best to honor your request, however the earlier you complete your application and finalize your payment, the better your chances of getting the housing you desire. Roommate requests must be mutual.*

DINING INFORMATION: Please list all food restrictions, including allergies, or any special dietary needs.

_____

_____

COMMUNITY LIFE POLICY

By living in an SMU-IN-TAOS residence hall, I am residing in a living and learning community. As a member of this community, I have certain rights as a resident and as a student. I recognize that other members of the community have the same rights. For this reason, it is important to compromise to maintain an environment in which all members of the community may grow as individuals and may pursue learning as a fundamental part of the campus residential experience.

As a member of the SMU-in-Taos community, I agree to uphold the SMU Student Code of Conduct, SMU Residence Life and Student Housing Community Standards, the SMU Honor Code, and all University Policies, as well as Local, State, and Federal laws. I understand that if I am found responsible for a violation of any codes, standards, or policies, I will be subject to sanction or disciplinary action.

Housing assignments are based upon many factors. Students will be assigned per request when possible.

I have read and agree to abide by the above stated policies and all policies in effect on the SMU-IN-TAOS, Fort Burgwin campus. I agree to keep the SMU-IN-TAOS Office informed of any changes that might affect my attendance at Fort Burgwin for the summer.

Signature of Applicant _____ Date _____