



## **Bowie State University Alternative Spring Break 2019 Service Trip to Charleston, SC**

This year's Alternative Spring break trip is focused on serving the residents of Charleston, South Carolina. Service may include working at local community organizations such as churches, food banks and schools. Students will also have the opportunity to participate in cultural/educational events during evenings. This trip is scheduled for **March 18–22, 2019**. The application process is required due to the limited number of spots available for this trip.

### **Cost to BSU Student: \$100**

#### **Program fees include the following:**

- Transportation
- Lodging accommodations
- Admission for tours

#### **Required documents:**

- Participant Agreement
- Financial Obligation Form

#### **Application deadline:**

Friday, March 8, 2019 by 12 a.m. via email

## ASB Charleston, SC Participant Agreement

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Academic Classification(circle one):

Freshman      Sophomore      Junior      Senior      Graduate Student

GPA: \_\_\_\_\_ Major(s)/ Degree Program: \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Dietary Needs: \_\_\_\_\_

Allergies

*food/medicine/etc:* \_\_\_\_\_

**If selected to participate in ASB Charleston, SC 2019, I will attend ALL participant meetings (1-2 before trip) as described in the program details information.**

**By turning in this form, with the signed financial obligation form you are committing fully to the program including but not limited to financial and participatory requirements. Student participants are expected to be in good academic standing with the university. Trip attendance is not guaranteed until these checks have been completed.**

**By signing this form, I agree to participate in nightly meetings and journaling during the ASB trip.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit to [vpsa@bowiestate.edu](mailto:vpsa@bowiestate.edu) and [jcarpenter@bowiestate.edu](mailto:jcarpenter@bowiestate.edu).

For more information, contact Janay Carpenter by email or phone: 301-860-3289

**ASB Charleston, SC Application**

*Please attached additional sheet, if needed.*

1. What does it mean to serve?

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2. How do you hope to benefit from this trip?

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3. What activities or co-curricular things have you been involved with while at BSU (freshman may include activities from their senior year; please specify if activity is from high school)?

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4. What service have you performed while at BSU (freshman may include service from their senior year; please specify if service is from high school)?

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**Financial and Travel Obligation  
Form Alternative Spring Break 2019**

*Listed below is an outline of the financial and travel obligations related to the Alternative Spring Break (ASB) Program in Charleston, SC.*

**Total Program Fee:** \$500 per participant

**Cost to BSU Student: \$100**

*\*The Student Affairs office will cover the remaining cost per student.*

**Payment:**

- ✓ 100% of the money is due by March 11, 2019 by 4 p.m. in the Student Affairs Office (2<sup>nd</sup> floor of Henry Administration)
- ✓ Payment can be accepted in the form of cash.
- ✓ Full \$100 MUST be paid in full to be eligible to go on the trip.

**ASB Program Fees include the following:**

- ✓ Transportation
- ✓ Lodging accommodations
- ✓ Admission for tours

**Statement of Agreement:**

I have read and understand the financial obligations of the ASB program. I acknowledge my responsibility to seek out sponsorship if I cannot afford to pay for the trip myself. I have read and understand the ASB Financial Obligation Form, Participant Agreement, and the Business Agreement and accept all rights, responsibilities, and obligations that are affiliated with Bowie State University's ASB. I authorize ASB staff to verify enrollment, financial payments and discipline records.

Name (Printed): \_\_\_\_\_ Student ID: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_