

ACADEMIC TOURS CLEARANCE FORM

Student Name	ID #
Contact Information: Email	Phone
Tour Name	Total Cost \$
Credits: □ Graduate □ Undergraduate Number of cr	\$3960 tuition + \$3000
SECTION 1: STUDENT INSURANCE	
☐ Andrews University Student Insurance	
☐ Personal Supplementary Insurance	
Student Insurance Officer Signature	Date
SECTION 2: REQUIRED SIGNATURES	
Student Signature	Date
Tour Director Signature	Date
SECTION 3: FINANCES -Office Use Only	
Financial Resources	
Loans: \$ Federal Aid: \$	Educational Allowance: \$
Account Details	
Current account balance: \$	Estimated account balance: \$
Financial Arrangements	
Clearance Authorization	
SFS Assistant Director, Student Accounts Signature	Date

RETURN COMPLETED FORM TO THE TOUR DIRECTOR.