

Faculté des lettres et des sciences humaines École de langues

Please, read, sign and send back this contract before your arrival

EXPLORE FIVE-WEEK FRENCH-LANGUAGE BURSARY PROGRAM CONTRACT

Summer, part 1 (May-June), Spring-Explore@elul.ulaval.ca,

Summer, part 2 (July-August), Summer-Explore@elul.ulaval.ca

Your signature on this form will constitute acceptance of the course requirements as outlined below. Please read carefully.

- A) I understand and agree to abide by the following course requirements:
 - 1. Use of French at all times.
 - 2. Completion of the placement test at the required time and of final exams.
 - 3. Attendance and active participation in all classes.
 - 4. Completion of all assignments.
- B) I understand that I am responsible for any loss of, or damage to: property, program materials or equipment belonging to *Université Laval*.
- C) I understand that I am responsible for my own personal financial needs and security.
- D) I understand that any one of the following acts will lead to a meeting with the Explore coordinator and could result in immediate dismissal from the Explore Program and need a refund of the bursary.
 - 1. Refusing to speak or to make an effort to speak French at all times.
 - 2. Having a negative attitude in the classroom or during sociocultural activities.
 - 3. Arriving late for class and mandatory activities.
 - 4. Missing classes and other mandatory activities without a valid reason.
 - 5. Refusal to provide a medical certificate for an absence due to illness. (Certificate is obtained at the student's expense).
 - 6. Use of alcohol, and use and possession of non-medical drugs in the classroom.
 - 7. Disruptive conduct or harassment of any person(s) while in the Explore Program.
 - 8. Misconduct, noise, and partying in university residences.

N. B. The Program ends on the last Saturday, at the end of your last class.

E) A student who wants to leave the program will have to leave the residences. He will also have to pay back the unused portion of the bursary intended for food before his departure date.

I have read the Program Contract as outlined above. I understand and agree to abide by the terms of the contract during the period of my attendance at the l'École de langues de l'Université Laval.

Surname, Name:			
Date: Y	M	D	
Province:			

Please, check the semester you will attend

Summer part 1 (May-June) Summer part 2 (July-August)