



Global Business Experience Application

China: October 22-31, 2010
Application Deadline: May 22, 2010



Office use only

Registration complete

Copy to Accounting Office

COA adjusted if applicable

Student Information

Print full legal name as it appears on your passport: (Include Mr., Mrs., Ms., Miss, Dr., Rev., etc., before last name. Please indicate any nickname after your given name.)

(title) (Last) (first) (Middle)

Birth date: _____ Age: _____

If you do not have a passport please apply for one as soon as possible!

Passport # _____ Exp. Date: _____

Address: _____

City: _____ State/Zip Code: _____

Phone (h): _____ Phone (w/c): _____

e-mail: _____

Citizenship: _____ Student ID# _____

Cohort _____

Trip Costs

Global Business Experience fees are collected with course tuition as follows:

- The initial 50% of GBE fees are collected with tuition for the first course in the MBA program (BUS-505).
- The remaining 50% are collected with tuition for the fifth course in the program (MGT-531).

Return this completed form to the Professional & Graduate Studies Division, Cornerstone University no later than May 22, 2010.

Cornerstone University
Attn: Global Business-MBA
1001 E. Beltline Ave NE
Grand Rapids, MI 49525

Questions? Contact Kim Powell:
616.222.1503
800.947.2382
Kimberly_J_Powell@cornerstone.edu

Fax: 616.222.1528

Refund Schedule

The GBE Trip refund schedule is as follows:

- Refund of fees collected (up to the initial 50% of GBE fees); if the student withdraws from the MBA prior to the funds being committed (airfare, other reservations, etc.) for the student's chosen trip and/or prior to the beginning of the MGT-531 course of the MBA Program.
- No refund will be given after the MGT531 course begins.

Non-MBA students or Non-students -Cash Paying

I am cash paying.

Signature

All information and signature lines below *must* be filled out in order to process this application.

I have read and understood this application. I understand that I am responsible for trip costs even if I decide to not participate in the trip. Cornerstone University reserves the right to cancel trips, or limit participation at their discretion. Refunds will be made if CU cancels or does not allow a student to participate.

Signature of Participant: _____

Please complete page 2 (see over).

Plans and Goals

1. Why are you applying for this trip?
2. How does this trip relate to your vocation and life plans?
3. Describe your understanding of business as mission.

Health Issues

1. Describe any health problems such as allergies, disabilities, history of illnesses, medications, physical limitations, ability to cope with stress. Read the supplemental materials about immunizations for the region where we will be traveling.
2. Dietary restrictions –note any dietary restrictions here:

Emergency Contact Information:

Name: _____ Day Phone: _____

Evening Phone: _____ Cell Phone: _____

Address: _____

City: _____ State/Zip Code: _____

Relationship to you _____

Name: _____ Day Phone: _____

Evening Phone: _____ Cell Phone: _____

Address: _____

City: _____ State/Zip Code _____

Relationship to you _____