



Dear Exchange Student,

Most visiting students find that the University of Rhode Island is a very welcoming campus. Our office will make our best effort to assist you in their transition to campus life. Please use this form to submit the relevant arrival information.

YOU MUST RETURN THIS FORM EVEN IF YOU DO NOT NEED ALL OF OUR SERVICES.

TIPS FOR COMPLETING & RETURNING ADOBE FORMS

VIEWING PORTABLE DOCUMENT FORMAT (PDF) FILES

If you are unable to view use online form or document it may be due to the fact that you do not have the latest version of Adobe Reader. You may download the latest version free from Adobe Systems.

USING PDF FILES

Adobe Reader will allow you to complete the forms on line and print them.

If you choose to complete a form and submit electronically, simply place your cursor in the first field of the form to be completed and tab to succeeding fields until all the desired fields are completed.

SAVING A COMPLETED PDF FORM

PDF forms **cannot** be saved unless you have Adobe Acrobat. Adobe Reader alone will not allow PDF forms to be saved.

If you do not have Adobe Acrobat, simply print the form after entering your data, then fax or scan and email the document to oiie@etal.uri.edu

TO SAVE A PDF FORM IN ADOBE ACROBAT:

- To save the PDF file click on the *Save a copy of the file* (disk icon) button on the command bar on your browser. (Note the *File> Save As* feature will not work in your browser window.)
- You can create a folder in Adobe and save the copy as a PDF file into that folder using any name you choose for that file. You can then reopen that file and change or add to it.
- Email the completed form saved with your name to oiie@etal.uri.edu

This form **MUST** be completed by all exchange students and returned to oiie@etal.uri.edu by the following dates: For all students entering URI in the:

FALL: July 31st

SPRING: December 15TH

First Name: _____ Last Name: _____ Email: _____

Current Address: _____

Current Telephone # _____ Mobile #: _____

Home country: _____ Institution: _____

Major/Academic specific: _____ Language(s) spoken: _____

PEER AMBASSADOR REQUEST – PART 1

An optional program that we offer to incoming exchange students is the opportunity to be paired up with a current URI student with whom you may communicate prior to arriving on campus.

Are you interested in being matched with a URI peer ambassador?

YES (if yes complete Section 1) **NO** (if no move to Part 2)

PLEASE BRIEFLY ANSWER THE FOLLOWING QUESTIONS:

Do you prefer your Peer Ambassador to be: Male Female No Preference

Please list your interests, hobbies, and/or previous areas of campus involvement at your home institution:

Please list any campus resources or organizations that you are interested in learning more about or being involved with at URI. _____

What type of off-campus activities or field trips would you be interested in attending? Please list a few ideas or areas of interest? _____

In what ways do you think being paired with a Peer Ambassador might be most helpful to you? What do you hope to gain from the experience? _____

SHOPPING TRIP SIGN-UP REQUEST – PART 2

Our office offers transportation to a local shopping mall the week of your arrival. We offer this trip so that you may purchase items you will need for your term at URI. The Shopping Trip is only offered on listed on the **OIE Welcome Week Schedule**.

Are you interested in going on the shopping trip listed on the OIE Welcome Week Schedule?

YES! I would like to participate in the OIE/NSE shopping trip. I understand that I will receive further details about this activity when I arrive and check-in or at the OIE's Welcome Orientation.

NO. I will arrange to do my own shopping.

ARRIVAL INFORMATION SHEET – PICK-UP SERVICE REQUEST – PART 3

All Exchange students must complete PART 3. The Pick-Up Service is only offered on the specific Arrival Day listed on the **OIE Welcome Week Schedule**. Please wait until you receive this itinerary from our office.

YOUR NAME: _____ **URI ID Number:** _____

Please list a friend or family member's contact information in the event of an emergency situation.

Contact Name: _____ Relation to student: _____
Phone: _____ Email: _____

Airline Information

Departure Airport CODE: _____ Departure Date: Month ____ Day ____ Year ____
Departure Time: _____ AM PM Airline Name: _____
Flight Number: _____

Final Arrival Airport CODE: _____ Arrival Date: Month ____ Day ____ Year ____
Arrival Time: _____ AM PM Flight Name & Number _____

Train Station Information (if applicable)

Departure Station: _____ Departure Date: Month ____ Day ____ Year ____
Departure Time: _____ AM PM Train Number: _____
Arrival Station: _____ Arrival Date: Month ____ Day ____ Year ____
Arrival Time: _____ AM PM Train Number: _____

Hotel Information (if applicable)

If you will be arriving in Rhode Island prior to the start of OIE's Arrival Day (Please refer to OIE Welcome Week Schedule for dates) and will be staying at an accommodation in the area, please complete this section.

Hotel/ Residence: _____ Hotel/Residence Phone: _____
Date of Arrival: Month ____ Day ____ Year ____

Driving to URI (if applicable)

If you are driving to URI, please complete this section.

Date of Arrival: Month ____ Day ____ Year ____ Time of Arrival: _____ AM PM

PICK-UP SERVICE REQUEST

The pick-up service is only available to those arriving at T.F. Green Airport, the Kingston Train Station or staying at a T.F. Green Airport Area Hotels.

YES! I would like the Office of International Education & NSE to arrange a pick-up for me when I arrive at:

- The Kingston, RI train station.
 T.F. Green Airport.
 From my hotel. (There will only be hotel pick-ups from the "T.F.Green Airport – Area)

or

I will not utilize the Office of International Education & NSE pick-up service.

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