COST Withdrawal Policy:

I, the undersigned participant, agree that if withdrawal from the COST Program is required for any reason, it is my responsibility to communicate in writing my intent to withdraw by submitting appropriate documentation to my COST Coordinator. Documentation should be similar to what the college/university requires for absences. This will be retained in my file and a copy forwarded to the COST Director.

I also understand that if I leave my placement after arrival in the host country, I may be responsible for the entire placement fee.

_____

Signature of COST Program Participant Date

_____

Signature of COST Coordinator Date

COUNTY OF _____)
)
STATE OF _____)

BEFORE ME, a Notary Public in and for said County and State, personally appeared the above-named _____ who acknowledged that he/she did sign the foregoing instrument and that the same is his/her free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and official seal at _____, _____, this ____ day of _____, 20__.

_____

NOTARY PUBLIC