## **Ursinus College** Statement of Student Responsibility Regarding Participation in International Programs

The undersigned, being a student at Ursinus	College, and applying for participation in the
international program sponsored by	(institution or organization such
as Butler IFSA or CAPA) in	(country) for the period from
(departure date) to	(return date), hereby forever releases
Ursinus College and any officer, employee, director	or agent thereof from any and all liability for any act
or omission of any kind or character whatsoever and	releases them from any costs, damages, and claims
or assertions of any kind with respect to which I or m	y heirs, successors, or assigns may claim against
them and specifically without limitation agree as follo	WS:

Living conditions: I understand that living conditions (including but not limited to housing, access to computer facilities, television, and variety and type of meals provided) at overseas institutions or programs may differ significantly from the types of services and conditions provided on the Ursinus College campus. I recognize my responsibility to contact on-site overseas program officials immediately if I experience problems or conditions that are significantly below the standard for the country and institution I am attending.

Safety and culture awareness: I am aware of the risks of traveling and living abroad. I will give close attention to safety information provided both orally and in writing as part of the program orientation. I acknowledge that I will need to adjust my behavior, dress and activities in order to maximize my own personal safety and that of the program group while we are abroad. I recognize my responsibility to abide by the laws and customs of my host country and any other country I may visit.

Behavioral responsibilities and cause for dismissal: I am aware of the expectations for my behavior while participating in this program. I am aware that certain behavior is considered unacceptable in my program and in my host country and that inappropriate behavior could lead to my dismissal by the host institution. I hereby assure the College that I shall conduct myself in an appropriate manner at all times. The program director of the overseas program I elect to attend has the authority to establish rules necessary for the operation of the program. Should the director decide that a student must be removed from the program because of violation of such rules or for disruptive behavior, that decision will be final. Dismissed students will be responsible for any costs associated with an early return to their home or campus.

Legal problems: I acknowledge and understand that should I fall into legal problems with any foreign nationals or government jurisdictions of the host country, I will attend to the matter personally with my own personal funds. Ursinus College does not guarantee what, if any, assistance it can provide under such circumstances.

Medical insurance and immunizations: I understand it is my responsibility to take all required prophylactic treatments whether they be needed before leaving the U.S. mainland, during my education abroad and/or after my return to the U.S. mainland and to have insurance in force that will cover expenses incurred abroad for medical treatment including but not limited to hospitalization, evacuation and repatriation.

Disabilities and other conditions: I understand that I am under no legal obligation to reveal or otherwise make known any medical condition or disability, be it mental or physical, from which I suffer. I also understand that if I choose not to reveal such information, I may not receive the treatment, attention or accommodation I require during my participation in the program of my choice. I assume any and all responsibility for my treatment and wellbeing related to such conditions.

Personal possessions: I acknowledge my responsibility to secure insurance coverage for theft, loss or damage to personal possessions during my stay abroad.

College-issued laptop computer: I understand that if I choose to take my College-issued laptop computer abroad, I do so at my own risk. I further acknowledge that the technical support the College will provide long distance is limited to trouble-shooting, and that any service or replacement of parts will not be done until after I return to campus.

**Liability release**: I release Ursinus College or any employee, servant, agent, officer or director thereof, from any liability for injury to myself or any damage to or loss of my possessions caused by acts or omissions of any hotels, carriers, fellow students, restaurants, educational organizations, persons, groups or organizations, including but not limited to Ursinus College, their officers, employees, directors, agents or servants in connection with the work or study hereunder.

Additional information on health and safety abroad: It is the responsibility of the student participant and the parents to become informed about potential risks abroad. I acknowledge receipt of the following minimal list of websites and other sources of useful information related to my specific destination country or countries. In addition, I acknowledge that I accept whatever risks indicated therein.

Passports: http://travel.state.gov/passport/index.html

Health and Medicine: http://travel.state.gov/travel/tips/health/health\_1185.html

Centers for Disease Control: http://www.cdc.gov/

Drug Warning: http://travel.state.gov/travel/livingabroad\_drugs.html

Foreign entry requirements for US Citizens: See consular information sheet for destination

country: http://travel.state.gov/travel/cis\_pa\_tw/cis/cis\_1765.html

Document Requirements for travel abroad:

http://travel.state.gov/travel/requirements/requirements\_1233.html

U.S. State Department Travel Information and Advisories: http://www.travel.state.gov/

U.S. State Department Travel Warnings: <a href="http://travel.state.gov/travel/cis">http://travel.state.gov/travel/cis</a> pa tw/tw/tw 1764.html

Association for Safe International Road Travel: http://www.asirt.org

U.S. Customs: http://www.customs.gov/

Accommodations for special needs. I understand that the availability of medical, psychological and other services and specialists abroad varies widely, and I assume full responsibility for arranging in advance whatever services I may need. I understand that I can better ensure that my needs will be met if I make them known to the overseas program coordinator or the Ursinus College study abroad coordinator in advance.

<b>Student signature.</b> I have read the foregoing release and agreement and I accept the conditions st	atec
therein. I further state that the information I have provided herein is true and correct.	
Signature of student	

Date

Last revised: December 13, 2007

## Ursinus College Statement of Responsibility and Assumption of Risk Regarding International Programs Parent Waiver

The undersigned, being a parent and guardian or legal guardian of
, a student at Ursinus College, who has sought and received permission
from Ursinus College to participate in the international program sponsored by
(organization or institution) in (departure date) to
(country) for the period from (departure date) to
(return date). I understand that my child must travel by plane or boat from
(departure city) to (destination) in order to
participate in this program. I understand that such travel carries with it inherent risk. I hereby release and
forever discharge Ursinus College and each officer, director employee, trustee, servant, or agent of each
of them of and from any liability to me or my heirs, successors or assigns with respect to any act or
omission of any of them in any respect to the participation of my child in the program stated above.
I further agree that I will indemnify, defend and hold harmless Ursinus College, its staff, employees,
servants, representatives, trustees and agents from any claims of any nature made by my child or by me
on behalf of my child which may arise in any way or in any related way to any activity of
(student's name) in participation of the above stated program.
(*********************************
I have read and understand the terms and conditions of this indemnification and release, and I agree and
subscribe to them. My signature below also signifies that my son/daughter has sufficient health, accident,
disability, and hospitalization insurance to cover him/her during participation in the program and that
Ursinus College has no obligation to provide me with such insurance.
I further state that I have read the terms of release and agreement attached hereto that has been signed
by, my child or ward, with my permission, and I agree to be bound by the
same terms and conditions as if I myself had signed it.
Circulations of Donorst
Signature of Parent
Date

Last revised: December 5, 2005