

STEPHENS COLLEGE

May 2016

STATEMENT OF UNDERSTANDING, RESPONSIBILITY AND RISK FOR STUDY ABROAD

I, _____, have voluntarily decided to study abroad during _____ (summer or semester/year) at _____, a study abroad/exchange program of my choice (referred to as the "Program" hereinafter).

I acknowledge there are cultural and educational benefits to this study abroad/exchange Program that are likely to enhance my educational experience but that my participation in the Program is elective and that no one is requiring me to participate in this Program. I further acknowledge that to the extent that this Program generates course credits, I have the option of completing alternative courses in lieu of participating in this Program.

I acknowledge that after careful personal review, I understand the full scope of activities, risks, limitations, and potential benefits associated with this Program.

In consideration for the opportunity to participate in this Program, I voluntarily and without reservation and on behalf of myself, my heirs, and my estate, hereby release, waive, discharge, and hold harmless Stephens College, its trustees, officers, agents, and employees (hereinafter the "Releasees") from any and all liability, claims, demands, actions and/or causes of action whatsoever arising out of or related to any loss, damage to personal property, personal injury or death, that may be sustained by me, or to any property belonging to me, whether caused by the negligence of the Releasees, or otherwise, while participating in the Program, or while in, on, upon, or en route to/from the locations where the Program is being conducted. I further agree to indemnify and hold harmless the Releasees from any direct or indirect loss, liability, damage or costs, including court costs and attorney's fees that may incur due to my participation in the Program. It is my express intent that this release shall bind members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be deemed as a release, waiver, discharge, and covenant not to sue the Releasees. I hereby further agree that this agreement shall be construed in accordance with the laws of the State of Missouri.

BEHAVIORAL EXPECTATIONS

I am aware of the behavior that is expected of me while participating in the study abroad Program. I hereby assure Stephens College that I will conduct myself in a professional and appropriate manner at all times, both when I am in the company of other Program participants, staff and students at the host institution, and also when I may be physically separated from other program participants or staff. In addition to the behavioral expectations applicable to all Stephens College students at home and abroad, I agree that the study abroad Program I have chosen, including the host institution, may have in place specific rules and responsibilities or may promulgate the same from time to time and shall have the right to enforce such. I understand that the Program may at any time terminate my participation or impose

other consequences, in addition to any consequences outlined in Stephens College discipline policies for failure to maintain these standards or for any actions or conduct which the Program considers to be incompatible with the interest, harmony, comfort and/or welfare of the Program or the other students participating in the Program. If my participation is terminated, I consent to be returned to my home at my own expense with no refund of any fees. I further understand that if my participation in the Program is terminated, I will be responsible for any and all costs associated with my departure and that there will only be a refund of tuition and fees, if appropriate, pursuant to the policies of Stephens College and the Program. Failure to abide by the behavioral standards and/or my removal from the Program may also result in my receipt of a failing grade and no credit for a course. I acknowledge the faculty or staff members conducting the Program have the designated authority to remove a student from the Program in accordance with this provision in their sole discretion.

I understand that should I be dismissed from an abroad Program set forth in this policy that I am ineligible to apply for or participate in the study abroad Program for a period of one year from the date of dismissal.

ACADEMIC EXPECTATIONS

I acknowledge and understand that I am responsible for maintaining a full-time course of study, taking at least 12 hours per semester (minimum of 3 semester credit hours for summer programs). I also acknowledge that there may be required coursework prior to departure. I know I must attend all classes, take all examinations, and complete all of the assigned work (pre departure or on site). *I am* responsible for the classes that I have chosen, and such classes have been approved by the appropriate academic advisor. I realize that, if I take a selected course without proper approval, the class credits may not be applicable towards my degree. Further, I am fully aware and understand that if, while abroad, I don't take the necessary courses and earn the required credits towards progress in my degree program, I may not graduate as anticipated. I understand that it is my responsibility to be in clear communication with registrar, financial aid, accounting and my advisor about my plans to be away and to make appropriate plans for returning to campus. I am aware that this communication is critical to my ability to graduate in a timely manner.

I am also aware that on group tours or other activities arranged by Stephens or agents, I will accept the will of the majority whenever a matter of choice is presented to the group. I will also accept in good faith the instructions and suggestions of Stephens College or its agents in all matters relating to the program or the personal conduct of program participants.

I acknowledge that I must follow the requirements set forth for class attendance and participation by the faculty member(s) conducting the Program, including completing all assigned work and taking all examinations. I further acknowledge that my grade will be based upon my completion of the course requirements and my academic performance, and that my failure to meet course requirements could result in a failing grade and no credit for a course, reduced grade point average or other consequences.

I acknowledge that I am responsible for the classes that I have chosen and that I have had the opportunity to consult with an appropriate academic advisor. I further acknowledge that if I take a

course without proper approval, the class credits may not be applicable towards my degree. I am fully aware and understand that if while abroad I do not take necessary courses and/or earn the required credits towards progress in my degree program, I may not graduate as anticipated.

LEGAL ISSUES

I understand that I will be the subject to the laws of the host country and I agree to abide by those laws. I acknowledge and understand that, should I encounter any legal problems with any foreign nationals or governmental jurisdictions of the host country, or any country in which I travel, I must attend to the matter personally and with my own funds. Stephens College cannot provide assistance in such circumstances. I further agree that being charged with an infraction of the laws of the host country is grounds for immediate removal from the Program.

I am aware that in many countries the penalty for crimes involving illegal drugs is imprisonment and in certain countries, drug crimes may even be capital offenses punishable by death. I understand that neither Stephens College nor the American Embassy is able to provide assistance to me if I face charges related to illegal drugs. I understand that possession of illegal drugs or related paraphernalia may be grounds for immediate termination from the Program. I further understand that if I am terminated for these reasons, I will be subject to the provisions explained above (see section addressing behavioral expectations).

MEDICAL RESPONSIBILITIES

Understanding and Waivers:

I understand that there are certain risks inherent in international travel and even greater risks in a study abroad program, which may include additional travel. I further understand that serious injuries occasionally occur during participation in travel, and participants in activities associated with travel occasionally sustain mortal or serious personal injuries, property damage, or severe economic and social loss as a consequences of not only their own actions or negligence but the actions of others or the conditions of travel or equipment used, and that there may be other risks not known to me or not reasonably foreseeable at this time.

I understand that the Releasees cannot assume responsibility for any of my activities whether or not related to the Program. I hereby release, waive, and discharge Stephens College, its directors, faculty, and agents for all liability to the undersigned, his/her personal representative, assigns, heirs, and next of kin for any medical loss, damage, or injury, and claim of demand to the undersigned while participating in this Program.

Health: I am aware of my personal medical needs and I have consulted with a medical doctor as I deemed necessary. I agree that if I require an accommodation due to disability and/or religious observances in order to fully participate in the study abroad program, I will follow (or have already followed) the proper procedures for assessment and approval of such accommodation by the necessary Stephens College parties, as reasonable, at least 120 days prior to the beginning of the Program.

Insurance: I shall obtain and maintain accident and illness health insurance coverage, as well as insurance coverage for medical evacuation and repatriation that is applicable outside the United States. By my signature below, I certify that I have confirmed that my health care coverage will adequately cover me while outside the United States, and hereby release the Releasees from any responsibility or liability for expenses incurred by me for illnesses or injuries, including death, that I may incur while abroad. I understand that, in order to participate in the Program, I am required to maintain such insurance coverage for the duration of the Program. I also understand that Stephens College additionally recommends that I carry appropriate insurance coverage for the entire time that I am abroad, including any time of independent travel before or after the Program period.

MEDICAL MATTERS

I shall consult with my physician in regards to necessary immunizations and any other medical matters relating to my participation in the Program. I also understand that the Centers for Disease Control and Prevention publishes health information for travelers, and I understand it is my responsibility to review such information for any and all destinations where I expect to travel as part of the study abroad Program. I understand it is my responsibility to make determinations as to what immunizations and other health precautions are appropriate related to my travel.

Hospitalization or Treatment: I am aware that, should I require hospitalization or any medical treatment while in the host country, Stephens College cannot and does not assume responsibility for payment of such costs. I hereby assure Stephens College that I have assumed all risks and responsibilities, and that I have adequate medical insurance to meet any and all needs for payment of medical costs during the study abroad/exchange program including during travel segments, if any. I recognize that the Releasees are not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility therefore, however, I authorize Stephens College and its faculty, staff, employees and representatives to act in any attempt to safeguard and preserve my health and/or safety during my participation in the Program, including authorizing medical treatment on my behalf and at my expense and returning me to the United States at my own expense for medical treatment in case of any emergency.

Travel Considerations

I acknowledge that it is my personal responsibility to conduct all due diligence and obtain all documents required for entering my host country, or any foreign country, and that my failure to obtain these documents does not constitute grounds for withdrawal with refund, except if the host country has refused an entry visa after following all of the other procedures. I understand that it is my responsibility to attain any applicable visa and endorsements. I agree to pay all study abroad and travel fees to act in a timely manner with payments.

At all times during my travel with the Program, I agree to be in possession of the necessary travel documents, including a valid passport, visa or other documentation. I understand that maintenance of such documents is my responsibility. In the event that I am prevented from traveling with the group at

any time due to my failure to be in possession of the necessary documents, I understand that I shall bear all responsibility for the costs, delays and accommodations necessitated thereby.

I understand that activities or independent travel conducted when I have free time before, during or after the Program shall be unsupervised by Stephens College, its agents or employees. I agree that the Releasees shall have no responsibility or liability for any injury, damage or loss suffered by me during such periods of independent activity or travel, and this Release shall remain in full force and effect during such times.

Without additional consideration, I give Stephens College, in perpetuity, my permission to use, for promotional purposes, any photographs, videos and blogs taken during course participation.

I agree that Stephens College reserves the right to make cancellations, changes, or substitutions in the Program at any time or for any reason, with or without notice, and that the Releasees shall not be liable for any loss whatsoever to the Program participants as result of such changes. Any refund of tuition or fees, if appropriate, shall be issued pursuant to Stephens College's policies. Upon twenty-four hour notice (by posting to the website, written notice or other-wise), Stephens College shall have the right at any time to revise all or part of the rules and responsibilities associated with any study abroad/exchange program. Stephens may also adjust related fees as deemed appropriate by the college.

I understand that if I voluntarily leave the Program for any reason, including illness, I will be responsible for any and all costs associated with my departure and that there will only be a refund of tuition and fees, if appropriate, pursuant to the policies of Stephens College and the Program.

PRE/POST ORIENTATION

I understand that I will need to attend a pre/post Orientation conducted by the study abroad coordinator or a faculty member at Stephens College.

Signature:

I understand that this agreement applies to my entire participation in the program, including any excursions. I acknowledge that I have read this document in its entirety, understanding its significant legal consequences, and that I sign it voluntarily.

Name of Student/Signature (print and sign)/Date

If under the age of 18, signature is required of parent/guardian:

Parent/Guardian Name/Signature/Date