LU form SA-4 / August 2015 R	Record of Study Abroad Briefing	Page 1 of 4
Print Full Name:	Lander ID#:	
Home (permanent) Address:		
I will be studying in	from	_ to
DO NOT WRITE H	BELOW THIS LINE UNTIL TOLI	O TO DO SO
	ubmitting this document is not suffici or of Study Abroad or by a person des	<u> </u>
		Initial:
•	ansfer academic credit back to Lander e Office of the Registrar at Lander bef	
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	nder's online Study Abroad Handbook about the harsh penalties for buying, s	
megar drugs in other countries.		Initial:
by Cultural Insurance Services Interequires this insurance. If I am part	the Basic Plan of medical and emergernational. I understand that Lander Uticipating in a study abroad activity of must review and accept the insurance I	Iniversity normally  Effered by a third-party
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5) I have initialed the upper right signature below applies to the entire	corner of each page of this document	. I understand that my
signature below applies to the enti-	re document.	Initial:
DO NOT SIGN UNTIL A NOTA	ARY IS PRESENT TO WITNESS Y	OUR SIGNATURE:
Student Signature:	1	Date:
Notary Witness:		
Printed Name:		NOTARY SEAL
My term expires:		

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I hereby agree as follows:

**A.** I understand that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, drug use, and behavior. I recognize that behavior that violates those laws or standards could harm the University's relationship with those countries and the institutions there, as well as my own health and safety. I will to the best of my ability become informed of, and will abide by, all such laws and standards for each country to or through which I will travel during this Program.

I understand that any behavior that: 1) is clearly disruptive to the Program or other participants or the professors of the Program; 2) has a clearly detrimental effect on the local facilities or the social relations of the group to the local society; or 3) is a violation of local laws, will be addressed immediately with a first warning. A second occurrence or similar violation of the common rules will be addressed by sending the student home. For any behavior that is deemed to be a major problem, a student may be immediately expelled from the Program.

[Some examples (not a complete listing): rude and obnoxious behavior due to excessive drinking; shouting and other loud expressions after hours in the hotel where the participants are staying; excessive rudeness and behavioral disrespect to students or faculty in the program or to the citizens of the countries visited; any activities considered to violate reasonable standards of conduct and protocol; any illegal behavior including buying, selling, or using drugs or other illegal substances; engaging in the illegal buying or selling of currency on the "black market."]

- **B.** I also will comply with the University's usual rules, standards, and instructions for student behavior. I waive and release all claims against the University that arise at a time when I am not under the direct supervision of the University or that are caused by my failure to remain under such supervision or to comply with such rules, standards, and instructions.
- **C.** I understand that any student who participated in any cheating behavior, or is otherwise implicated by such behavior, will be punished according the Lander University standards. If I drop the study abroad academic course while abroad, I will be sent home.
- **D.** I agree that the University has the right to enforce the standards of conduct described above, in its sole judgement. It will impose sanctions, up to and including expulsion from the Program, for violating these standards or for any behavior detrimental to or incompatible with the interest, harmony, and welfare of the University, the program, or other participants. I recognize that due to the circumstances of foreign study programs, procedures for notice, hearing, and appeal applicable to students under disciplinary proceedings at the University may be unavailable or carried out in an abbreviated manner. Procedural hearings and appeals will be available upon my return to the University. If I am expelled, I consent to being sent home at my own expense with no refund of fees.

I have carefully read this "Code of Conduct" form. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This agreement shall become effective upon receipt of my application by Lander University at its offices in Greenwood, South Carolina, and shall be governed by the laws of the state of South Carolina, which shall be the forum for any lawsuits files under or incidents to this agreement or to the Program.

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This is a release of legal rights—read and understand it before signing. If you are under 18 years of age, your parent or legal guardian must also read and sign this form.

I hereby agree as follows:

#### Risks of Study Abroad.

I understand that participation in the Lander University Study Abroad Program specified above (the Program) involves risk not found in study at the University. These include risks involved in traveling to and within, and returning from, one or more foreign countries; foreign political, legal, social, and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; local medical and weather conditions; and other similar matters.

## **Institutional Arrangements.**

I understand that the University does not represent or act as an agent for, and cannot control the acts or omissions of, any host institution, host family, transportation carrier, hotel, travel agent, tour organizer or other provider of goods or services involved in the Program. I understand that the University is not responsible for any actions or omissions that are beyond its complete and direct control. I hereby release the University from any injury, loss, damage, accident, delay, or expense arising out of any such matters.

#### **Independent Activity.**

I understand that the University is not responsible for any injury or loss I may suffer when I am traveling independently or am otherwise separated or absent from any University-sponsored activities.

#### Heath and Safety.

- **A.** I have consulted with a medical doctor with regard to my personal medical needs. By my signature below, I confirm that there are no health-related reasons or problems that preclude or restrict my participation in this Program.
- **B.** I am aware of all applicable personal medical needs. I have arranged, through insurance or otherwise, to meet any and all needs for payment of medical costs while I participate in the Program. I recognize that the University is not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility therefor. However, in the event of sickness or injury, I hereby authorize my third-party provider, my university abroad, or my accompanying Lander professor to secure whatever treatment deemed necessary, including the admission to a hospital, the administration of anesthesia, the transfusion of blood, and surgery. If I require medical treatment or hospital care, in a foreign country or in the United States, during the Program, the University is not responsible for the cost or quality of such treatment or care.
- **C.** The University may (but is not obligated to) take any actions it considers to be warranted under the circumstances regarding my health and safety. I agree to pay all expenses relating thereto and release the University from any liability for any actions.

### **Standards of Conduct.**

- **A.** I understand that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, drug use and behavior. I recognize that behavior which violates those laws or standards could harm the University's relation with those countries and the institutions therein, as well as my own health and safety. I will become informed of, and will abide by, all such laws and standards for each country to or through which I will travel during the Program.
- **B.** I will also comply with the University's rules, standards and instructions for student behavior. I waive and release all claims against the University that arise at a time when I am not under the direct supervision of the University or that are caused by my failure to remain under such supervision or to comply with such rules, standards, and instructions.

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- **C.** I agree that the University has the right to enforce the standards of conduct described above, in its sole judgment, and it will impose sanctions, up to and including expulsion from the Program, for violating these standards or for any behavior detrimental to or incompatible with the interest, harmony, and welfare of the University, the Program, or other participants. I recognize that due to the circumstances of foreign study programs, procedures for notice, hearing and appeal applicable to student disciplinary proceedings at the University do not apply. If I am expelled, I consent to being sent home at my own expense with no refund of fees.
- **D.** I will attend to any legal problems I encounter with any foreign nationals or government of the host country. The University is not responsible for providing any legal assistance or any other form of assistance under any circumstances.

### **Program Changes.**

The University has the right to make cancellations, substitutions or changes in case of emergency or changed conditions or in the interest of the Program. I understand that the University's fees and program charges are based on current airfares, lodging rates and travel costs, which are subject to change. If I leave or am expelled from the Program for any reason, there will be no refund of fees already paid. I accept all responsibility for loss or additional expenses due to delays or other changes in the means of transportation, other services, or sickness, weather, strikes, or other unforeseen causes. If I become detached from the Program group, fail to meet a departure bus, airplane, or train, or become sick or injured, I will at my own expense seek out, contact, and reach the Program group at its next available destination.

### Assumption of Risk and Release of Claims.

Knowing the risks described above, and in consideration of being permitted to participate in the Program, I agree, on behalf of my family, heirs, and personal representative(s), to assume all the risks and responsibilities surrounding my participation in the Program. To the maximum extent permitted by law, I release and indemnify the Lander University Board of Trustees, the Lander University, and their officers, employees and agents, from and against any present or future claim, loss or liability for injury to person or property which I may suffer, or for which I may be liable to any other person, during my participation in the Program (including periods in transit to or from any country where the Program is being conducted).

### **Emergency Contact Information.**

I will supply the names and addresses of a person or persons who should be contacted in an emergency.

I have carefully read this Release Form before signing it. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This agreement shall become effective only upon receipt of my application by Lander University at its offices in Greenwood, South Carolina, and shall be governed by the laws of the state of South Carolina, which shall be the forum for any lawsuits filed under or incident to this agreement or to the Program.

# A parent or legal guardian must sign below if the student is under 18 years of age:

I (A) am the parent or legal guardian of the above Ap	plicant, (B) have read the foregoing Release Form
(including such parts as may subject me to personal f	inancial responsibility), (C) am and will be legally
responsible for the obligations and acts of the Applica	ant as described in this Release Form, and (D) agree
for myself and for the Applicant, to be bound by its to	erms.
X	
Signature of Parent/Guardian	Date