

WPI-SPONSORED OFF-CAMPUS TRAVEL STUDENT PARTICIPATION AGREEMENT – 21-22 ACADEMIC YEAR

This is an agreement between WPI and students who participate in a WPI-sponsored off-campus travel program (the “Program”). Every student who participates in a Program must read and sign this Agreement to acknowledge that they understand the expectations and responsibilities for participating in a Program. WPI’s Global Experience Office (“GEO”) will provide a copy of this Agreement for every student’s records.

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Financial Responsibilities

I understand, acknowledge and agree:

- I am responsible for all fees and costs, including housing, related to the Program.
- I will be charged for any damage I cause to property at the Program site, including the property of WPI or the Program and my housing.
- If I am dismissed or withdraw from the Program, I will be responsible for the cost of my early departure and I will remain responsible for all Program fees and costs.
- For students in the Global Projects Program: I will be charged a withdrawal fee if I decide not to participate in the Program, according to the [Global Projects Program Withdrawal Policy](#).

Pre-Departure Orientation

I understand, acknowledge and agree:

- I will attend all pre-departure orientations and read all pre-departure materials for the Program.
- For students traveling internationally, I will download the [International SOS Membership App](#) onto my cellphone.

Special Services and Accommodations

I understand, acknowledge and agree:

- I am responsible for my own personal needs at the Program site.
- If I have a disability and will need academic or other accommodations at the Program site, I will follow the requirements in [Disability Disclosure](#).
- For students traveling internationally, services in other countries (air conditioning, phone and internet, transportation, utilities, health services, etc.) may be unavailable or less advanced than in the U.S.

Travel to Program Site

I understand, acknowledge and agree:

- I will arrive at the Program site on/before the start date and remain until the end date, according to the requirements in [Travel Dates](#).
- I will make my own roundtrip travel arrangements to the Program Site in a timely manner.

Travel to International Programs

I understand, acknowledge and agree:

- I will register my roundtrip travel arrangements on the [WPI MyTrips International Travel Registry](#) by the required deadline.
- I will obtain a valid passport and visa (if necessary) according to the requirements in [Passport and Visa](#).
- For U.S. Citizens: I will register for the State Department's Smart Traveler Enrollment Program ([STEP](#)) or (for the Global Projects Program) the GEO will enroll me in STEP. I will update the STEP registry whenever I leave the Program site.
- For non-U.S. citizens: I will contact my country's embassy/consulate to determine if they have a service similar to STEP and I will use such service, if available.

Communication

I understand, acknowledge and agree:

- I will provide my personal contact information to the GEO and Program staff. For students traveling internationally, the GEO and Program staff may request, and I will provide, my foreign phone number and address.
- I will be available by cellphone or the recommended communication method for the Program for the duration of the Program.
- I will check my WPI email account frequently and promptly respond to emails before and during the Program.
- I will read the information on [Communication](#).

Emergency Contact

I understand, acknowledge and agree:

- I will provide the GEO and Program staff with my emergency contact information.
- I will ensure that my emergency contact is authorized to make medical decisions on my behalf.
- WPI will contact my emergency contact if there is a concern about my safety or well-being.

My Health

I understand, acknowledge and agree:

- I am responsible for understanding my own health needs (medical and/or psychological) and the challenges and risks associated with traveling to the Program site.
- I can discuss any questions or concerns about my health with WPI, including GEO, the Student Health Center, the Office of Disability Services, and the

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Student Development and Counseling Center, and with International SOS.

- I will complete any medical forms required by GEO or the Program accurately and submit them in a timely manner. Failure to do so may delay my participation in the Program.
- I will follow my doctor's orders with respect to my health condition(s).
- I will ensure my immunizations are up-to-date and will follow my doctor's orders on recommended/required immunizations or medications for the Program site.
- I will read the [CDC's](#) recommendations for the Program site.

Medical Insurance for Domestic Programs

I understand, acknowledge and agree:

- I will continue to carry my own personal medical insurance during the Program.
- I am responsible for any expenses not covered by my personal medical insurance. I understand that I may be asked to pay for medical care first and then submit a claim to my insurance for reimbursement.

International Travel Medical Insurance

I understand, acknowledge and agree:

- WPI provides comprehensive medical, security and evacuation services for all WPI students traveling internationally on WPI-sponsored off-campus Programs.
- Students are automatically enrolled in WPI insurance for the duration of the Program upon registration of travel.
- I will continue to carry my own personal medical insurance during the Program.
- WPI insurance does not provide coverage for my independent travel before or after the Program dates. I will obtain insurance coverage for myself if I choose to travel before or after the Program dates.
- I am responsible for any expenses not covered by WPI's insurance. I understand that I may be asked to pay for medical care first and then submit a claim to WPI's insurance for reimbursement.
- I will read the information on [International Travel Resources and Assistance](#) and the [WPI International SOS Members Portal](#).

Authorization for Emergency Medical Treatment

I understand, acknowledge and agree:

- I authorize WPI and the Program to act on my behalf if I need emergency medical treatment.
- I grant permission for emergency medical treatment, including anesthetic, blood transfusion and surgery, as recommended by medical professionals.
- I authorize the release of my medical records to medical professionals.
- WPI will notify my emergency contact of my emergency medical situation in advance, if possible.

Medical Withdrawal

I understand, acknowledge and agree:

- If a medical professional examines me and determines that I cannot participate in the Program, I will notify the GEO in writing and provide a certification from the medical professional who examined me. During an emergency, this requirement will not apply.
- If the GEO or the Program determines based on this certification or other information that my health jeopardizes the safety or well-being of myself or others, I will withdraw from the Program. If I do not withdraw, I will be dismissed from the Program.
- If I withdraw from the Program for a medical reason, I will work with the GEO to seek partial or full academic credit and/or a refund of Program fees and costs, if available.

Academic & Behavior Expectations

I understand, acknowledge, and agree that I cannot participate in the Program if I am on academic probation, face any pending legal or disciplinary action, or have any outstanding financial obligation to WPI.

Academic Expectations

I understand, acknowledge and agree:

- I will participate fully in all official Program activities, including preparatory courses and required orientations.
- I will read the information on [Academic Preparation, Site Specific Preparation Requirements and Co-op and Off-Campus Projects](#).
- I may be dismissed from the Program if I fail to meet academic expectations.

Behavior Expectations

I understand, acknowledge and agree:

- I will comply with all WPI policies governing student behavior, including the [WPI Student Code of](#)

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[Conduct](#), the [Alcohol and Drug Policy](#), and the [Academic Integrity Policy](#).

- I will comply with all Program policies, including those in the Site Specific Handbook and [Behavior Expectations](#), and as communicated to me by the GEO and Program staff.
- For international programs, including Puerto Rico, I will not drive motorized vehicles during the Program as required by [Transportation](#).
- WPI may dismiss me from the Program and from WPI for any conduct or behavior that causes a concern for the safety or welfare of myself or others or interferes with the learning objectives of the Program.
- I may be dismissed from the Program if I fail to meet behavior expectations.

Free Time

I understand, acknowledge and agree:

- Students are permitted to participate in personal activities during Free Time (the time outside of official Program activities) and before/after official Program dates.
- If I want to travel during Free Time or before/after official Program dates:
 - I will disclose my travel arrangements and contact information to the GEO and Program staff, as required by [Onsite Travel](#).
 - I will register any travel, outside the program country, on the [WPI MyTrips International Travel Registry](#).
 - I will research any area I plan to visit, including safety, security, and health risks.
 - I will make my own travel arrangements and secure insurance (if needed).
 - I will update my emergency contact information before I travel.
- Personal activities and travel are not sponsored or endorsed by WPI.
- If I engage in personal activities and travel, I do so at my own risk, and I am solely responsible for my own actions and I assume all personal responsibility and liability associated therewith.

High Risk Activities

I understand, acknowledge and agree:

- WPI discourages students from participating in high-risk activities. High risk activities include, but are not limited to, extreme sports and other risky activities.

- If I participate in high-risk activities, I do so at my own risk, and I am solely responsible for my own actions and I assume all personal responsibility and liability associated therewith.

Demonstrations

I understand, acknowledge and agree:

- I will not participate in demonstrations during the Program. If I find myself at a demonstration by accident, I will leave the area as soon as it is safe.
- If I participate in a demonstration, I will be subject to local laws and may be subject to disciplinary action by WPI and the Program.
- If I have any concerns about civil unrest before or during the Program, I will contact the GEO.

Program Alteration or Cancellation

I understand, acknowledge and agree:

- The Program is subject to change at the discretion of WPI and the Program staff.
- If WPI determines that a Program site poses a significant threat to my safety or well-being, WPI may cancel or interrupt the Program and require me to leave the Program site immediately. If I do not comply, I do so at my own risk and I may be dismissed from the Program and WPI.
- If WPI cancels the Program, WPI will refund all recoverable Program fees and housing costs.
- WPI encourages me to consider supplemental insurance options to cover trip interruption and cancellation costs, such as canceled flights, travel disruptions, and lost luggage. Trip insurance is not required or arranged by WPI and must be purchased on an individual basis.

Safety & Security for International Travel

I understand, acknowledge and agree:

- I will read the information on [Health, Safety and Security](#).
- For students traveling internationally, I will consult the following resources on the Program site prior to traveling:
 - The State Department's [country profile page](#).
 - The CDC's [traveler's health page](#).
 - The [WPI International SOS Members Portal](#).

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Local Laws and Regulations

I understand, acknowledge and agree:

- I will follow the host country's laws and regulations.
- I do not enjoy the protections of the U.S. Constitution and legal system while abroad.
- If I violate the host country's laws and regulations, I do so at my own risk, and I am solely responsible for my actions. I may be arrested and the U.S. embassy and WPI will not have the power to release or represent me if I am arrested.

Restriction on Travel to Certain Locations

I understand, acknowledge and agree:

- WPI does not allow students to travel to locations with the following designations:
 - [State Department Travel Advisory](#) Level 3, unless the student received written/electronic approval from the GEO prior to such travel.
 - [State Department Travel Advisory](#) Level 4.
 - [CDC Warning Level 3](#).
- I may be dismissed from the Program if I travel to a location with such designation.

Federal Compliance Issues

I understand, acknowledge and agree:

- U.S. law prohibits the export of restricted information to certain foreign countries and foreign citizens. WPI's emphasis on science and engineering Programs makes us particularly sensitive to these regulations.
- If I take a laptop computer or electronic device with me, I will not have any restricted information on that device that may violate laws or regulations governing the export of sensitive information.

Disclosure of My Personal Information

I understand, acknowledge and agree:

- I authorize the GEO Director (or his/her designee) and the Program director to communicate before, during, or after the Program with my parents/guardians, my emergency contact, my health care providers, University authorities, and news outlets regarding my participation in the Program.
- This information may be protected under the Family Educational Rights & Privacy Action (FERPA), and I hereby authorize and consent to WPI's release of

such records and I hereby release WPI from liability with respect to any such disclosure.

- I have read, understand, and acknowledge WPI's [FERPA Policy](#).

Emergency Information

I understand, acknowledge and agree:

- In an emergency, WPI and/or the Program will notify my emergency contact of my location and my condition.
- I hereby authorize to WPI and the Program to communicate the following information to news outlets or others in an emergency: my status as a student of WPI and participant in the Program, and information concerning my location and my condition.

Photo and Project Information Release

I understand, acknowledge and agree:

- I authorize WPI to make photographs, video and audio recordings of me during the Program. I further authorize WPI to release my name, major, class year, hometown and state, student email, local telephone number, and Project location, title, and advisor(s).
- This information and these images and/or sounds will remain the property of WPI and may be used in advertising or marketing campaigns on WPI's websites, and for promotional and informational material.
- I waive and release any rights to compensation for, or ownership of, such information, images, and/or sounds.

Release of Liability, Assumption of Risk, Indemnification

I understand, acknowledge and agree:

- The Program presents risks to me and my property and WPI cannot guarantee my safety.
- I freely choose to participate in the Program and I freely accept the risks associated with the Program.
- My safety and well-being are primarily dependent on me taking proper care of myself, researching and familiarizing myself with the Program and location, and avoiding any activity or behavior which would cause harm to myself or others.
- Despite precautions, accidents and injuries can occur.

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- The Program may involve unfamiliar or different cultures, customs, climates, and laws and regulations.
- I may be injured, my personal property may be lost or damaged, and I may suffer financial loss as a result of my participation in the Program.

I ASSUME ALL RISKS RELATED TO THE PROGRAM, including but not limited to:

- Death, injury or illness from accidents of any nature whatsoever, including bodily injury or illness of any nature whether severe or not, temporary or permanent, that may occur as a result of my participation in the Program, personal activities during Free Time or before or after the official Program dates, or high-risk activities.
- Loss or injury as a result of a crime or criminal acts by third parties, terrorism, war, civil unrest, riot, detention by a foreign government, arrest or other act of any government or authority.
- Theft or loss of personal property during my participation in the Program.
- Loss or death or injury as a result of any natural disaster or event or extreme weather conditions or events.
- Alteration, including delay, extension, or cancellation, of the Program due to natural disaster, civil unrest, terrorist attack, medical quarantine, or any other disturbances or causes.

I further acknowledge that the above list is not inclusive of all possible risks associated with the Program, and that the above list in no way limits the extent or reach of this release and covenant not to sue. I understand that participating in the Program is an acceptance of risk of injury.

In consideration of being accepted into and participating in the Program, I, to the fullest extent permitted by law, agree to forever release and on behalf of myself, my spouse, heirs, representatives, executors, administrators and assigns, HEREBY DO FOREVER RELEASE WPI, its affiliates, subsidiaries, trustees, officers, students, employees and agents, and their respective successors, heirs, and assigns, and all Program employees and their agents, (the "Released Parties") from any cause of action, claims, or demands of any nature whatsoever, including but not limited to a claim of negligence which I or my spouse, heirs, representatives, executives,

administrators and assigns may now have, or have in the future against WPI and the Released Parties on account of personal injury, bodily injury, economic loss, property damage, death or accident of any kind, arising out of or in any way related to participating in the Program, however the injury or loss is caused, including whether by the ordinary negligence of WPI and the Released Parties or otherwise.

In consideration of being permitted to participate in the Program, I hereby COVENANT NOT TO SUE and agree to INDEMNIFY AND HOLD HARMLESS WPI and the Released Parties from any and all causes of action, claims demands, losses or costs of any nature whatsoever arising out of or in any way relating to the Program.

I hereby certify that I am voluntarily assuming all risks, known or unknown, associated with the Program.

I understand that I will be solely responsible for any loss or damage, including death, which I sustain or cause, whether in whole or in part, while participating in the Program and that by this agreement I am relieving WPI and the Released Parties of any and all liability for such loss, damage or death.

My signature below indicates that I have read and freely signed this Agreement, which shall take effect as a sealed instrument. I further certify that I am 18 years of age and legally competent to sign this agreement. I further understand that the terms of this agreement are legally binding.

This agreement is made in sole consideration of WPI permitting my participation in the Program. I expressly agree that this waiver and release is intended to be as broad and inclusive as permitted under any and all applicable laws, and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.