



Student Acknowledgment and Consent Form for Study Abroad Programs

I am a student at Lamar University, a member of the Texas State University System, and will be participating in a study abroad program as identified below. I understand that my participation is voluntary and agree to the following terms:

CODE OF CONDUCT – RULES AND REGULATIONS

I understand that I am expected to and will, while participating in the study abroad program, observe and comply with the same code of conduct and to follow all of the policies, rules, and regulations established in the Lamar University Student Handbook, as well as rules of The Texas State University System, while participating in a university-sponsored course abroad. I will abide by all the rules and regulations beginning with the very onset of participation in the program until completion of the program, including free time. I will conduct myself in a manner consistent with Lamar University's mission as an educational institution, as well as adhering to the rules of conduct established by The Texas State University System, faculty in charge and the host institution, including its staff, representatives or designees. I understand that if I fail to conduct myself in such a manner that it will be considered a violation of the Student Code of Conduct and disciplinary sanctions may be imposed as specified in the Student Rules and Regulations established in the Lamar University Student Handbook and rules of The Texas State University System.

As a guest in a foreign country, I will conduct myself in an appropriate manner which does not infringe upon or violate the customs and mores of the country in which the program is being conducted, and to abide by the statutes, laws, ordinances, orders, rules and requirements of the place or places where the program is conducted. Regarding the use of illegal drugs, narcotics, and alcohol consumption, as a U.S. citizen or legal resident of the US, I understand that I am responsible to uphold the law and comply with University rules/regulations while studying abroad and that failure to maintain these standards may result in immediate expulsion from the program.

I further understand that if it is determined that my participation in the program or my conduct adversely affects my health, safety, and/or the health, safety, and/or welfare of other program participants, I may be removed from the program, forfeiting all credit, funds, and related expenses, including the cost of transportation home. Moreover, illegal drugs, narcotics, and controlled substances are strictly prohibited by the Lamar University Code of Conduct and students found guilty of possession, use, or distribution of illegal drugs may be suspended from Lamar University and barred from admission to any other Texas State University System institution for the term of the suspension. I also understand that penalties in other countries may be more severe than in the U.S. and in the event I require legal representation in the host country, I am solely responsible for seeking and acquiring legal representation and will be

responsible for any and all legal fees and consequences. Furthermore, if I become an independent traveler, I agree to release/hold harmless/discharge and otherwise agree to indemnify, Lamar University and The Texas State University System, its board, officers, employees and representatives from and for any claims, demands, liability, lawsuits, injuries (including death), property damage, attorneys' fees, expenses, costs, causes of action, judgments or awards of any kind or character that may accrue, arise or otherwise exist because of my travel or participation in the program. This covenant not to sue and hold harmless shall bind the members of my family and spouse, my heirs, assigns and personal representatives.

REQUIRED DOCUMENTATION

I am responsible for and will accurately complete, in compliance with the Study Abroad Fee Grant Guidelines, all required documentation and to ensure that the minimum requirements are met in order to be considered for the Grant. The required documentation includes: the program application, health form, student acknowledgement and consent form, international travel release form, passport photocopy, and in cases where the student is not traveling on a group flight, a copy of their flight itinerary.

ORIENTATION

I understand that it is my responsibility to attend all the orientation sessions in accordance with the program. Failure to do so may result in being dropped from the program by the professor in charge of the study abroad program.

ACADEMIC RESPONSIBILITIES

I will discuss study abroad plans with my academic advisor to determine how this course could apply to my degree plan.

I agree to the following academic responsibilities: a) to attend all orientation and information meetings; b) to attend all regularly scheduled classes and field trips; c) to complete all course work assignments; d) to successfully complete the academic requirements in order to earn a passing grade for each college credit; e) to communicate all queries and concerns to the Director of Global Studies and Study Abroad during my participation in the program. I understand that in the event of course failure, I will be liable to return the Study Abroad Fee Grant award in accordance with the stated Global Studies and Study Abroad guidelines.

FINANCIAL RESPONSIBILITIES

I will ensure that I have sufficient funds for program-related expenses and make program payments (including tuition) by the stated payment deadlines. Failure to do so will result in the returning of all Study Abroad Fee Grant monies to Lamar University. I acknowledge that Lamar University reserves the right to change policies as circumstances require. This may include altering the selection criteria, the amounts of the Study Abroad Fee Grant awards, or any other conditions or terms, and/or costs in order to meet unexpected

changes in airfares, hotels/accommodations, or other related expenses due to currency exchange or any other tariff/rate and expenses that are subject to change.

CONSENT TO USE LIKENESS

I authorize Lamar University and/or The Texas State University System to take photographs, pictures, and videos in connection with my participation in the program of study; and that such media may be used in any material or website in a positive manner, for purposes related to the educational mission of Lamar University and/or The Texas State University System. I waive any right to review or approve the use of such media/images and relinquish any and all rights, title and interests to my likeness, including any copyright.

PASSPORTS AND VISAS

I acknowledge that I am solely responsible for obtaining a U.S. Passport and the proper visa (when necessary) for the country to be visited prior to participation in the study abroad program. The information is available at www.travel.state.gov. If I have a current passport, I will ensure that the passport has an expiration date of six (6) months from the departure date.

HEALTH MATTERS AND IMMUNIZATIONS

Students participating on LU faculty-led and semester exchange programs will be enrolled in qualifying coverage through ACE American Insurance Company as contracted by the Texas State University System. The fee for this coverage is built into the program expenses paid to Lamar University.

For non-Lamar University sponsored programs, I am responsible for purchasing and presenting proof of health insurance with international coverage, as well as medical evacuation and repatriation insurance.

I am responsible for and will: a) review the Center for Disease Control's Traveler's Health Website (<http://wwwnc.cdc.gov/travel/page/studying-abroad>) to check for *Travel Health Notices and Alerts*, learn about the health risks related to the country or countries to be visited, check for any weather, natural disaster or health concerns, and download and become familiar with *Your Survival Guide to Safe and Healthy Travel*; b) obtain the CDC's recommended immunizations; c) see a doctor before departing to discuss prescription medications and travelers' health issues, both physical and mental; and, to the extent to which I am comfortable, provide their program director with relevant information about health concerns and medications prior to departure; and d) assume full responsibility for any undisclosed physical, mental, or emotional issues, which might impair my ability to complete the program. I acknowledge that I am fit to travel and if I have any illnesses or conditions that may prevent me from traveling and participating in the program activities, it is my responsibility to consult with a medical physician prior to traveling and obtain medical clearance.

I understand that Lamar University faculty/staff may not be medical physicians and I am responsible for seeking medical expertise during the trip, if necessary. I give permission for Lamar University to notify the person or persons that I have listed as an emergency contact in the event that I become seriously ill or involved in an emergency situation during the program of study. In the event of a medical emergency during my participation abroad in the program, I will be responsible for any medical expenses, including deductibles, co-pays, etc.

Emergency Contact: _____ Relationship: _____

Phone: (____) _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Emergency Contact: _____ Relationship: _____

Phone: (____) _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

INTERNATIONAL TRAVEL SAFETY

I acknowledge that I am responsible for reviewing and becoming familiar with the STUDENTS ABROAD travel information available at studentsabroad.state.gov. I am also responsible for carefully reviewing the Travel Warnings, Travel Alerts and the Country Specific Information provided by the U. S. Department of State available at www.travel.state.gov. Moreover, Lamar University students are required to, and I acknowledge that I will, register in the *Smart Traveler Enrollment Program (STEP)*, a free service provided by the U.S. Government to U.S. citizens who are traveling to, or living in, a foreign country at <https://step.state.gov>.

CANCELLATION

In the unfortunate event that the planned program of study is cancelled prior to or during any portion of it due to unforeseen circumstances (e.g. political unrest, natural disaster, acts of terrorism or other unforeseen circumstances), I understand that I will only receive reimbursement for any recoverable costs. I agree that if I remain in the foreign country after receiving notice of the cancellation of the program that: a) I am responsible for my own care and safety; b) Lamar University will have no liability for my care and safety after I leave the program; and, c) I accept all responsibility for loss or additional expenses, including, but not limited to transportation and return travel, lodging, meals, personal and other program related expenses, or any other services granted to me in connection with remaining in the foreign country.

VOLUNTARY WITHDRAWAL

I agree that if I voluntarily leave the program of study prior to its completion due to my own circumstances that I am responsible for: a) informing the Director of Global Studies and Study Abroad (or his/her designee) of any change in plans concerning my status in the program; b) promptly returning, in full, the Study Abroad Fee Grant funds if I have received any such funds; c) my own care and safety, as Lamar University will have no liability for my care and safety after I leave the program; d) any and all loss or additional expenses, including, but not limited to transportation and return travel, lodging, meals, personal and other program related expenses, or any other services I incur in connection with my voluntary, early departure.

SIGNATURE OF STUDENT (AND PARENT/LEGAL GUARDIAN, WHERE APPROPRIATE)

By signing this form, I _____ LU ID # _____
certify that I understand and accept that I am responsible for the above-mentioned duties related to my participation in a Lamar University-sponsored, faculty-led course, semester exchange, or a Study Abroad program selected on my own initiative.

Study Abroad Program Name (“Program”): _____

Country: _____ Start Date: _____ End Date: _____

Signature of the student: _____ Date: _____

If the above signed is not of legal age at the date of signing, the following statement must also be signed by the student’s parents/legal guardians and there must be a fully executed Travel Permission for Minors Form, along with other required forms signed by the parents/legal guardians.

As the parent or legal guardian of the participant whose signature appears above, I have read and understand the conditions outlined in this document, have given my child or ward permission to participate in the program identified above, and agree to be bound by the conditions contained in this and other related documents.

Printed name of Parent/Legal Guardian: _____

Signature of Parent/Legal Guardian: _____ Date: _____

Printed name of Parent/Legal Guardian: _____

Signature of Parent/Legal Guardian: _____ Date: _____