International Mobility Program (Non-Co-op) Form

30 April 2016

International Mobility Program (Non-Co-op) (Form 30)

Acknowledgement, Release and Waiver

This form should be submitted after the University of Waterloo pre-departure training course has been successfully completed. The pre-departure training course is mandatory and will provide you with information essential to completing this form.

**Personal information**

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<th>Student ID:</th>
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<th>Academic program:</th>
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**Travel information**

Purpose of travel: (please refer to the definitions below and select the appropriate category)

- **Exchange program** [A program offered at a partner institution (inclusive of coursework, work terms, and/or internships) while paying tuition fees to the home institution]

- **Study abroad program** [A program offered at a partner institution or as part of a University of Waterloo discipline (inclusive of coursework, work terms, and/or internships) whereby tuition and/or the respective program fees are paid to the host institution/program]

- **Service learning program** [A program whose pedagogy revolves around experiential learning with a focus on development activities that serve the needs of a community]

- **Volunteer** [An altruistic experiential learning opportunity or program arranged by an individual participant, which is not associated with academic course credits]

- **Field course** [A University of Waterloo course involving a mandatory field/travel component abroad as part of the course curriculum] **Course number** ____________

- **Research or field work** [Travel for the purpose of research, workshops, or field work outside of academic coursework]

- **Internship – Non-Co-op** [A paid or unpaid experiential learning opportunity or program aligning academic studies with work experience (inclusive of academic, industry, government, and/or not-for-profit sectors)]

- **Joint academic program** [An academic program in which the curriculum is either a dual degree or is coordinated and offered jointly by two or more institutions and leads to the completion of a dual degree, joint degree, or a degree that is officially recognized by the participating institution(s).]

- **Other (please state the travel activity)** __________________________

**University of Waterloo contact (advisor/field work PI/supervisor):**

**Host organization abroad:**

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<th>Departure date:</th>
<th>Return date:</th>
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Your contact information abroad

**Complete mailing address abroad:**

**Primary phone number abroad:**

**Alternate phone number abroad:**

Assumption of Risks, Responsibility, and Liability Waiver

As consideration for being permitted to participate in the above-mentioned Program, and for other good and valuable consideration, I hereby acknowledge and agree:

- I have completed the pre-departure training course, all pre-departure steps recommended as part of that course, as well as any additional pre-departure steps deemed prudent as a result of the research I have conducted into my destination, all other places I plan to travel before, during and after arriving at my destination, and the international mobility program (the “Program”).

- I have completed research into the Program, my destination and all other places I plan to travel before, during or after arriving at my destination, including without limitation, transportation, accommodation, communications, academic arrangements, research-related arrangements, food/diet, financial considerations, legal considerations, insurance, immigration matters, social practices, customs, cultural norms, standards for behaviour, safety, security, political stability, natural hazards, healthcare, required vaccinations and other recommended medical precautions.

- Unless I am participating in a University of Waterloo organized Program which is supervised on location by a University of Waterloo employee and for which University of Waterloo has agreed to provide the following in written documentation governing the Program, I understand that I am responsible for making all of the arrangements on my own or with the Host, including without limitation, transportation, accommodation, communications, academic, research-related, food/diet, financial, legal, insurance, immigration, safety, security, healthcare, required vaccinations and other recommended medical precautions.

- Without limiting the generality of the above:
  - I have informed myself of all risks (the “Risks”) to my person and possessions associated with participation in the Program, including without limitation, personal injury, sickness, death, or loss of or damage to my personal property.
  - If my purpose of travel is for individually arranged research or field work, I have also completed and submitted the supplementary Field Work Risk Management Form.
  - I will inform myself of and abide by all applicable policies, procedures, guidelines, regulations and similar (the “Policies”) of the University of Waterloo and host organization (the “Host”), if applicable.
  - I will inform myself of and abide by the laws (including immigration), social practices, customs, cultural norms and standards for behaviour laws (the “Standards”) in the locations where I will be travelling or staying.
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I understand that the failure to abide by Policies or Standards may increase Risks and/or result in disciplinary action or termination of my involvement in the Program, at the discretion of the University of Waterloo, Host or government, without financial or other recourse to the University of Waterloo, Host or government.

The University of Waterloo is not responsible for and does not guarantee the obligations of any third party involved in my travel or Program.

I will complete a pre-departure physical, obtain required immunizations, and take other healthcare precautions recommended by my healthcare provider.

I have investigated the impact of my travels and participation in the Program on my government-provided healthcare coverage (e.g. OHIP/UHIP) and have made the necessary arrangements with the coverage provider in order to ensure that my coverage will not lapse or otherwise be affected by my absence.

I have obtained and will maintain adequate insurance for the duration of my travels to address the Risks, including without limitation, medical, dental, travel, liability, loss, theft and accident insurance. I have spoken to my insurance carrier about the Program, travel plans, existing conditions and other factors to ensure that those factors do not negatively impact my coverage.

In particular, I have, and will maintain for the duration of my travels, out-of-province health insurance coverage under the University of Waterloo FEDS/GSA Health and Dental Plan (or equivalent coverage if I opted out of the FEDS/GSA Health and Dental Plan), and consider it to be appropriate for the Risks I know or reasonably ought to know I will be facing.

I understand and have the information necessary to contact my insurers in the event of an emergency or other insurable event.

I understand that the University of Waterloo does not maintain insurance coverage for my benefit.

I have a passport which is valid for at least six months following my return date from the Program (the “Valid Passport”). I understand that I may not be allowed to travel, enter or reenter countries (including Canada) without a Valid Passport.

I have obtained all immigration documents (e.g. permits, visa) which are necessary and appropriate for the Program and associated travel. I understand that there can be serious consequences for failure to obtain the necessary and appropriate immigration documentation, including without limitation, detention, fines and expulsion from the country.

I understand that becoming involved in political activities in opposition of governments, organizations, individuals or other entities while travelling abroad may significantly increase Risks.

Before and during my travels, I will monitor Global Affairs Canada Travel Reports (www.travel.gc.ca) for the regions in which I plan to travel and will abide by all directives of the Canadian government and the University of Waterloo, even if I am not a Canadian citizen.

I understand that the University of Waterloo may cancel a Program or decide not to approve my travel on the basis of the Global Affairs Canada travel warning or other information related to the Risks in that region, without financial or other recourse to the University. If the travel warning changes after departure and, if the new travel warning is level three or four, I should evacuate the country as soon as possible. I understand that I am responsible for making evacuation arrangements and to ensure my own safety during evacuation; the university may
not be able to assist me, is not responsible for ensuring my safety and cannot guarantee that evacuation will be possible.

- I understand that the University is not responsible for and has no input into the creation of the Global Affairs Canada travel warnings and cannot guarantee their accuracy.
- When I arrive, I will register at the consulate of the government that issued my passport.
- I will register with MyTrips services of International SOS, which provides security and medical assistance, as well as international travel advice.
- I have updated my contact and my emergency contact information in the University of Waterloo’s systems. The contact information contained in this form is consistent with the information contained in the University of Waterloo’s systems.
- I will promptly notify the University of Waterloo and my designated emergency contact if any contact information changes.
- I understand that any communications from the University will be sent to my University of Waterloo email address, and I agree to check that email address regularly while travelling.
- I have informed my designated emergency contact regarding all aspects of my travel abroad, including the possible Risks, and ensured that my emergency contact has a copy of all of my personal information, including contact information, passport, immigration documents, government healthcare coverage (e.g. OHIP/UHIP number), supplementary medical/travel/other insurance coverage, blood type and any information such as allergies, drug sensitivities, regular medications, pre-existing conditions, and other information that may be of significance to the university, or a physician or hospital treating me in an emergency situation.
- In the case of an emergency, I consent to the release of personal information as deemed appropriate by the University of Waterloo, acting reasonably.
- I will act safely and responsibly, and take all such other reasonable precautions to ensure my personal welfare.

- The information provided by me or on my behalf is complete and accurate, and I will maintain its completeness and accuracy during the period of my travels and participation in the Program. I consent to the collection, use and disclosure of my personal information in connection with the Program and for the other purposes set forth herein or reasonably connected thereto.
- I am solely responsible for my actions, inactions, conduct and behaviour, including without limitation, my negligence, wilful misconduct, or failure to abide by the terms of this Form, Policies and Standards, and all consequences flowing out of the foregoing.
- **DISCLAIMER:** The University of Waterloo, its governors, officers, employees, representatives, students, volunteers, successors, affiliates and/or assigns (the “Releasees”) shall not be responsible for any harm, loss or injury, including death, suffered by the me or any other person, at any time for any reason whatsoever, whether reasonably foreseeable or not, including, but without limitation, any Risks, harm, loss or injury, including death, caused by negligence on the part of the Releasees in connection with my travel or the Program.
- **RELEASE:** I, on my behalf and on behalf of my heirs, next of kin, executors, administrators, assigns and personal representatives (the “Releasors”), hereby release and forever discharge the Releasees and each of them from any and all suits, actions, causes of action, claims or demands of whatsoever kind and howsoever arising in relation to my travel or the Program, whether known or unknown, whether reasonably foreseeable or not and which the Releasors now have or at any time hereafter may have from any cause matter or thing whatsoever relating to my travel or the Program.

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• **INDEMNITY:** I hereby covenant and agree with the Releasees that I, on my behalf and on behalf of the Releasors will at all times hereafter indemnify and save harmless the Releasees and each of them from all suits, actions, causes of action, claims or demands of whatsoever kind and howsoever arising, whether known or unknown, whether reasonably foreseeable or not, whether arising from the negligence of the Releasees or otherwise, which may be made or brought against the Releasees in any way arising out of my travels or participation in the Program or otherwise arising, including the costs of defending any such suits, actions or claims on a substantial indemnity basis.

• I understand that the terms of this agreement cannot be modified, waived or interpreted except in writing by the University of Waterloo and that no oral modification, waiver or interpretation shall be valid.

• I am of age of majority as defined by the Age of Majority and Accountability Act (RSO 1990), have had the opportunity to seek or have waived my right to seek legal advice, and have the full right, authority and capacity to agree to the terms of this Form.

• This agreement is and shall be effective and binding upon me, my heirs, next of kin, executors, administrators and assigns.

By signing below, I am indicating my understanding of, agreement to and willingness to be bound by the terms contained herein.

Signature:

Date: