

HAMPTON UNIVERSITY
International Office

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Statement of Responsibility and Assumption of Risk
Regarding Study Abroad Programs

The undersigned is a student duly enrolled in courses offered through Hampton University's Study Abroad Program through the University's International Office.

In consideration of being allowed to participate in a Study Abroad Program,
I, _____ agree to the following conditions of participation:

Behavioral Responsibilities:

I am aware of the expected behavioral responsibility of any Hampton University student participating in this program. I am aware that I will be a guest in a foreign country and that certain behavior will be unacceptable and could result in a possible disruption of my program of study on the ground of inappropriate behavior. I hereby assure the University that I will conduct myself in an appropriate manner at all times. Such behavior shall include moments when in the company of other program members and moments when I am physically separated from other program members. I recognize that inappropriate behavior is cause for dismissal from the program by Hampton University of the host institution.

Academic Responsibilities:

I, the undersigned, hereby acknowledge and understand that I am responsible for maintaining a full-time course of study (at least 12 hours per week/term for semester Study Abroad Programs and at least 3 hours per week/term for summer Study Abroad Programs) while abroad. I guarantee that I will attend all classes, take all examinations, and do all assigned work. Hampton University guarantees all course work for elective credit, while the student is responsible for presenting sufficient information on general studies, major or other Hampton University requirements.

Legal Problems:

I, the undersigned, acknowledge and understand that should I fall into legal problems with any foreign nationals or government jurisdictions of the host country, I will attend to the matter personally with my own personal funds. Hampton University does not guarantee what, if any, assistance it can provide under such circumstances.

Travel Problems:

Hampton University cannot assure that travel arrangements will be without certain disruption. Accordingly, I acknowledge and agree to accept all responsibility for loss or additional expenses due to delays or other changes in the means of transportation, other services, sickness, weather, strikes or other unforeseen causes.

I, the undersigned, acknowledge and understand that Hampton University assumes no liability whatsoever for any loss, damage, destructions, theft, or the like to my luggage or personal belongings. I acknowledge that I must retain adequate insurance or have sufficient funds to replace such belongings and there from will hold the University harmless.

Medical Responsibility:

I, the undersigned, am aware that there are certain risks inherent in international travel and that Hampton University cannot assume responsibility for all or certain of my activities. I am aware of my personal medical needs and hereby assure the University that I have consulted with a medical doctor, as I may have deemed necessary, with regard to any of my personal needs. Further, I am aware that the University cannot be responsible for attending to any of my medical needs.

Should I require hospitalization while in a foreign country or in the United States during this program, I am aware that the University cannot and does not assume any legal responsibility for payment of such costs. Rather, I hereby assure the University that I have assumed all risk and responsibility for such costs and have adequate hospitalization insurance to meet any and all needs for payment of hospital costs during this program.

I expressly understand and agree to indemnify and hold harmless Hampton University, its Board of Trustees, and International Office, its agents, affiliates, officers and employees from any and all claims and causes of action for damage to or loss of property, personal illness or injury or death arising out of travel or activity conducted by or under the control of Hampton University with regard to the aforesaid program.

I understand that, as a student in a country other than the United States of America, I will be subject to the laws of that country. I agree to conduct myself in a manner that will comply with the regulations of my host university.

Student's Name (Print)

Signature

Date

Student's Country of Citizenship

Signature of Witness

Pre-Departure Orientation:

I have received the Hampton University International Office booklet for Pre-Departure Orientation and understand the information provided therein for my study abroad experience.

Signature: _____ Date: _____