

## ASSUMPTION OF RISK AND GENERAL RELEASE FORM

### ***THIS IS A RELEASE OF LEGAL RIGHTS - READ AND UNDERSTAND BEFORE SIGNING***

I am a student at the John F. Kennedy School of Government at Harvard University (“Harvard”) and have received funding and/or will receive academic credit for research, study or an internship in a foreign country or countries (the “Project”). I have chosen voluntarily to travel. I was not required to travel to a particular location as a condition of receiving my degree. This agreement confirms my understanding of the following:

1. Risks of International Travel. I understand that participation in the Project and travel involves risks not found in study at Harvard. These include without limitation risks involved in traveling to and within, and returning from, international locations; foreign political, legal, medical, social and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; and local weather conditions. I understand that the Project involves additional risks including, without limitation, crime, accidents, disease, terrorism and civil unrest. I will take every precaution to safeguard my health and to protect my personal belongings from damage or theft. I acknowledge that Harvard recommends that I never travel alone, particularly at night. I recognize that I may be subjected to risks, illnesses, injuries and even death. I have made my own investigation of these risks, understand these risks and assume them knowingly and willingly.

Although Harvard is providing funding and/or academic credit for the Project, Harvard cannot guarantee that my specific Project will take place in a safe and secure environment. These are judgments that I recognize I must independently make.

I have read and understood all information on the U.S. State Department website (<http://travel.state.gov>) about the country or countries to which I am traveling, including, without limitation, the U.S. Department of State Consular Information Sheet and the State Department Warning (if applicable).

2. Health Insurance; Medical Care. I carry valid and current medical insurance and have a valid insurance identity card to bring. I have determined that this insurance is adequate to cover injuries or illnesses that I may sustain while participating in the Project. I will be solely responsible for payment in full of all costs of medical care I may receive overseas. I am also aware that, during my participation in the Program, I will be automatically enrolled in, but must register for, the International SOS Travel Assistance Program (“ISOS”), which offers medical information and evacuation, emergency assistance including translation services, legal referrals, and general travel advice and is a supplement to, not a substitute for, health insurance. I have reviewed the information about ISOS found at:

[http://vpf-web.harvard.edu/rmas/4\\_insurance/intnlisos.html](http://vpf-web.harvard.edu/rmas/4_insurance/intnlisos.html).

I understand and agree that if, during my participation in the Project, Harvard learns that I am experiencing serious health problems, have suffered an injury, or am otherwise in a situation that raises significant health and safety concerns, then Harvard may contact the person whose name I have provided as my “emergency contact.” I understand that Harvard ordinarily will not initiate such contact without first having a discussion with me.

3. Standards of Conduct. I recognize that I assume an important personal obligation to conduct myself in a manner compatible with local laws and regulations, and with Harvard's policies for student conduct. I promise to act responsibly and will become informed of, and will abide by, all such laws, regulations and standards. I will comply with Harvard's policies, standards and instructions for student behavior. I agree that Harvard has the right to enforce the standards of conduct described above.

4. Travel Arrangements. I understand that Harvard does not represent or act as an agent for, and cannot control the acts or omissions of, any host family, client, employer, transportation carrier, hotel, tour organizer or other provider of food, goods or services involved in the Project. I understand that Harvard is not responsible for matters that are beyond its control, and that it cannot warrant the safety or convenience of the circumstances under which I will be living or working.

5. GENERAL RELEASE. Knowing the risks described above, I agree, individually and on behalf of my family, heirs and personal representatives, to assume all the risks and responsibilities involved in my participation in the Project. To the maximum extent permitted by law, I (individually and on behalf of my family, heirs and personal representatives) release, hold harmless and agree to indemnify Harvard, and its officers, directors, faculty, staff, representatives, employees and agents, from and against any present or future claim, damage, loss or liability for injury to person or property which I may suffer, or for which I may be liable to any other person, related to my participation in the Project (including periods in transit to or from my destination), resulting from any cause, including but not limited to ordinary or gross negligence.

I certify that I am age 18 or older. I have carefully read and freely signed this Assumption of Risk and General Release Form. I understand and agree that no oral or written representations can or will alter the contents of this document. I agree that this agreement shall be governed by the laws of the Commonwealth of Massachusetts (excluding its conflict of laws principles).

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name (print) \_\_\_\_\_

Emergency contact information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Country(ies) to be visited while traveling on Harvard business: \_\_\_\_\_

Dates of Proposed Travel: \_\_\_\_\_