

ACKNOWLEDGEMENT OF RISKS AND RELEASE OF RESPONSIBILITY

The University of Illinois at Chicago offers students the opportunity to enroll in overseas study programs operated by many different educational institutions. Certain potential risks to personal health and safety are associated with international travel and residence in a foreign country. You should not participate in a program unless you are willing to accept associated risks.

The University of Illinois at Chicago cannot guarantee the health and safety of participants in any program or eliminate all risks from abroad environments.

READ AND INITIAL EACH STATEMENT BELOW

_____ I understand and accept that there are certain risks associated with international travel and residence in a foreign country and that the University of Illinois at Chicago cannot control these risks.

_____ I understand and accept that these risks may include exposure to potentially serious health and safety hazards such as: transportation accidents, storms, floods, earthquakes, and other natural disasters; infectious diseases, inadequate medical care, remote access to medical treatment; armed insurrections; and terrorist activities.

_____ I understand and accept that the University of Illinois at Chicago is not in a position to guarantee my personal health or safety during my participation in any program or activity abroad nor is the University responsible in any way for my personal decisions regarding my health and safety.

_____ In consideration of being allowed to enroll and participate in any UIC sponsored program, the undersigned hereby releases the University of Illinois at Chicago, its Board of Trustees, officers, agents and employees from any and all claims arising out of or in any way connected with any university department or unit and the undersigned's participation in the program or activity abroad, including, but not limited to the risks as outlined above.

_____ I understand and hereby acknowledge that I assume all risks incurred by my participation in this program/activity.

Program/Activity

Location

Dates

By check mark in this box, I have carefully read the foregoing Release & Waiver, I know and understand the contents hereof, and that I voluntarily acknowledge my acceptance of these terms. I certify that I am at least 18 years of age and that I have read and fully understood this Waiver and Release. I also certify that I will be enrolled in the university's International Health Insurance plan for the duration of my UIC sponsored activity abroad.
<<http://studyabroad.uic.edu/international-health-insurance/>>

Student Name

UIN

Date