Student Global Health Program Contract

Student Name

Program

The Student named above agrees as follows:

Risks of Global Health Program. I understand that participation in a Global Health program at Des Moines University (“University”) involves risks not found in domestic rotations and programs. These include risks involved in traveling to and within, and returning from, one or more foreign countries; foreign political, legal, social, and economic conditions; local medical and weather conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; increased potential for theft of personal property (which is not covered by the program’s insurance), as well as other matters described in the information posted on the University’s Global Health website which I have reviewed and will continue to check prior to departure and during the program. I have made my own investigation and am willing to accept these risks.

A. Institutional Arrangements. I understand that University does not represent or act as an agent for, and cannot control the acts or omissions of, any host institution, host family, transportation carrier, hotel, tour organizer or other provider of goods or services involved in the Global Health Program. I understand that University has exercised its best efforts in regard to these matters, but that it is not responsible for occurrences that are beyond its control.

B. Comprehensive Release of Liability. As condition precedent to participating in this program, University requires participants to execute the Comprehensive Release of Liability and Consent to Secure Medical Treatment which is appended to this Contract as Appendix B. By signing this document you are waiving certain legal rights. Therefore, we urge you to take the time to read it carefully and we urge you to contact an attorney if you have any questions about it.

C. Health and Safety.

1. I have consulted/will consult with a medical doctor with regard to my personal medical needs. I have provided/will provide University with all medical data and any other personal information necessary for a safe and healthy Global Health program experience. There are no physical or mental health-related reasons, problems, or special dietary requirements or restrictions which preclude or restrict my participation in this program.

2. I am aware of all applicable personal medical needs. I recognize that, while the University will use its best efforts to see that I receive adequate medical care while in this Program, I assume all risk and responsibility for my medical or medication needs and the cost thereof. If I require medical treatment or hospital care in a foreign country or in the United States during the program, I authorize the University to secure any necessary care deemed appropriate.

3. The University may take any actions it considers to be warranted under the circumstances to protect my health and safety. I agree to express any health or safety concerns promptly to Global Health program staff or other appropriate persons.

4. Information for students with disabilities who may require accommodation: The University makes reasonable accommodations for students with disabilities who are otherwise qualified to participate in its activities and programs. However, the Americans with Disabilities Act does not govern accessibility standards in other circumstances.
countries. The University does not discriminate on the basis of disability in admissions for Global Health programs, but is not responsible for assuring accessibility in international locations and cannot guarantee that accommodation will be available. While the University will try to arrange accommodation for special needs, students with disabilities must understand that some international experiences may not be appropriate for them.

In order to address this concern, the University policy requires students with special needs who require accommodation to self-identify at the time of application for participation in a Global Health program. The University will work with the campus disability services representative to determine whether the student’s needs can be accommodated.

D. Standards of Conduct.

1. **Academic Conditions.** The University’s Global Health programs are not travel tours. While travel during free time can be quite educational in itself, the University program does not grant academic credit for travel. The Global Health programs are strictly academic in nature, and students must expect to invest at least the same amount of time and effort that would be required for courses at a comparable level on campus.

2. **Program Participation.** I understand that students enrolled in Global Health programs are required to attend all scheduled classes, lectures, activities and field trips. This also includes mandatory attendance at pre-departure orientation sessions provided by the Global Health department and orientations at the host institution. University orientation includes:
   
   a. Meeting and/or discussing with the Global Health dept. specific information about the rotation site
   
   b. Students are required to read the Global Health Safety guidelines posted on the website
   
   c. Enrolling in STEP (State Travel Enrollment Program) online
   
   d. In some cases, students are asked to write a post reflection essay

3. **General Behavior.**

   a. I understand that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, drug use and behavior. I recognize that behavior which violates those laws or standards could harm the University’s relations with those countries and the institutions therein, as well as my own health and safety. I am aware that if I violate laws of the host country, I may place myself in legal jeopardy and that U.S. standards of due process may not apply. I will become informed of, and will abide by, all such laws and standards for each country to or through which I will travel during the program.

   b. I also will comply with University’s rules, standards, and instructions for student behavior as outlined in the University’s honor code and the student handbook.

   c. I agree that I will not engage in any of the following activities while participating in the program (unless required by the program and supervised by a certified instructor): mountaineering where ropes or guides are normally used; hang gliding; parachuting; bungee jumping; operating a motor vehicle of any kind (including motorcycle); racing by horse, motor vehicle, or motorcycle; parasailing;
participating in any professional sports or competitions; or riding as a pilot, student pilot, operator, or crewmember in or on any type of aircraft.

d. I understand that before, during or after the program there may be time that is not allocated to academic or programmatic components and I may have the option to travel at my own expense. I agree to inform a representative of the program of my travel plans, understand that the University is not responsible for me while I am engaged in independent travel, and understand that any such travel is at my sole risk and expense.

e. I will attend to any legal problems I encounter with any foreign nationals or government at my own expense. I understand that, while the University will use its best efforts to assist me, it is not responsible for providing me with legal representation.

f. I agree that University has the right to enforce the standards of conduct described above in its sole judgment, and that it may impose sanctions up to and including removal from the program for violating these standards or for any behavior detrimental to or incompatible with the interest, harmony and welfare of the University, the program, or other participants at any time prior to or during participation in the program. I recognize that, due to the circumstances of the program, procedures for notice, hearing and appeal applicable to student disciplinary proceedings at my university do not apply. If I am removed from the program, either before or during participation, I understand that I will be sent home at my own expense.

E. **Financial Obligations.** Students are required (but not limited to) paying for airfare, VISA for the country to be visited (when applicable), accommodations, transportation, food, registration fees (if applicable), and any other local expenses.

F. **Program Changes.** The University has the right to cancel the program at any time prior to departure. It also reserves the right to cancel a program in progress and to require all participants to return to the United States if it determines that conditions pose a heightened risk of danger to students. I understand that the University may alter the program’s itinerary, travel arrangements, or accommodations due to emergency or changed conditions, and agree to be responsible for additional costs. Understanding that the University will make every reasonable effort to minimize the effect of same, I accept all responsibility for loss or additional expenses due to transportation delays, necessary program changes, sickness, weather, strikes, or other unforeseen causes. If I fail to meet a departure bus, airplane, or train, I will at my own expense seek out, contact, and reach the program group at its next available destination.

1. I agree that if I decide to leave the program for any reason, including illness or accident, I will be responsible for any and all costs and expenses associated with my return home.

2. I agree that the University may notify my emergency contact that I am no longer affiliated with the program.

I have read this Student Global Health Program Contract carefully before signing it, and agree that it contains my entire agreement as to my participation in the program. This agreement shall become effective only upon acceptance by the University of my application for the program.

__________________________________________  ____________________________
Signature of Student                                             Date

2/18/16