

## Statement of Authorization and Consent

Student's Full Name \_\_\_\_\_

Due Date: **Friday, April 13, 2012**

Program Title/Site \_\_\_\_\_

The following agreements are designed to protect all participants in Duke-administered semester Domestic Programs\*: the students, the faculty, Duke University, its trustees, officers, agents and employees, and the agencies and individuals cooperating with Duke University. We require that all students and their parents sign these forms to indicate their agreement and permission.

Duke University does not discriminate against individuals who have had physical, emotional or mental disorders. A medical examination may be required for those programs which are physically arduous and/or when it is a requirement of the hosting institution. **However, if a student has a history of any medical or psychiatric problems, we strongly advise that the student consult with a medical professional before departure for the domestic program to discuss the potential stress and difficulty of studying off campus.**

1. We understand that participation in the domestic program is entirely voluntary and that any program of travel involves some element of risk. We agree that in partial consideration of Duke University's sponsoring this activity and permitting the student to participate, we will not attempt to hold Duke University, its trustees, officers, agents and employees liable in damages for any injury or loss to person or property the student might sustain while so participating; and we hereby release Duke University, its trustees, officers, agents and employees from any liability whatsoever for any personal injury or property damage arising from participation in the program.
2. We understand that Duke University or the sponsoring institution reserves the right to make cancellations, changes or substitutions in cases of emergency or changed conditions or in the interest of the group. Should Duke University cancel the program, full refunds will be made unless the cancellation is due to political, natural, technological or other catastrophes beyond its control, in which case Duke University will be able to refund only uncommitted and recoverable funds.

We also understand that any deposit paid for a domestic program is non-refundable. In the case of withdrawal, any remaining paid fees will be refunded as follows, in accordance with the Duke University refund policy outlined in the Undergraduate Bulletin: Before start of program - full refund minus the program fee; during the first or second week - 80 percent; during the third, fourth, or fifth week - 60 percent; during the sixth week - 20 percent; after the sixth week - none. Other (non-Duke) sponsors/institutions have their own refund policies which we understand will be followed. Additionally, housing costs will not be removed from the withdrawn student's Bursar's account unless the room/bed they have reserved has been re-marketed.

A Duke student who receives financial aid for a Duke-administered semester program should understand that by signing this agreement and the Confirmation of Acceptance upon admission to the program, he or she is committed to pay the tuition, program fees and housing charges and that these charges will be put on the student's Bursar account. Further, we understand that any additional expenses while the program is in session that are not expressly covered by the program fee (e.g.: damages to housing, meals, etc.) must be borne by the student. Such charges are subject to be charged to the student's Bursar account).

3. All students who need to terminate their participation in their domestic program for any reason must notify the Duke Global Education Office for Undergraduates (GEO-U) by signing and submitting our official withdrawal form before leaving the program. Duke students who leave their programs without providing the Duke GEO-U with this official withdrawal notification may be withdrawn from Duke and will need to apply for readmission in accordance with official Duke University guidelines. In either case, grades reported by the program will appear on the student's Duke record in accordance with Duke grading and grade requirements as stated in the undergraduate bulletin. **Students who make course changes during the domestic program must also notify the GEO-U as well as their academic dean or their academic advisor.**
4. We understand that **continuation requirements**, as described in the Undergraduate Bulletin, also **apply to academic performance on Duke's domestic programs**. We understand that juniors who plan on changing their status from full-time to part-time must register their intention to do so by February 10 preceding the academic year in which the part-time semester will be taken, per Duke University policy. We also understand that graduation dates may need adjustment if domestic program transcripts are not received and credit transfers are not completed by the specified deadline. We understand that students receiving conditional waivers must meet all specified conditions in order to be eligible to participate in domestic programs.
5. We understand that the student, as a participant in the program, is a representative of Duke and by signing this agreement pledges to deport himself or herself in a manner that reflects favorably on both and upholds the Duke Community Standard. We understand that in addition to regular classes the program may include planned lectures and field trips which are germane to the educational experience, and that the student agrees to participate willingly in such activities in addition to attending the regular classes. Duke University and/or the sponsoring institution may discipline a student or dismiss him or her from the program for behavior detrimental to the program. **A dismissed student will receive no refund.**

\* The Duke-administered semester Domestic Programs include: Duke in Los Angeles(spring), Duke in New York Arts and Media (fall) , Duke in New York Financial Markets and Institutions (spring).

6. We understand that Duke University requires that appropriate sickness and accident insurance cover all students for the duration of the domestic program and that they be financially responsible for all medical expenses. In addition, we understand that payment for medical expenses customarily will have to be advanced and reimbursement sought later from the insurance carrier.

\_\_\_\_\_ (name of student) is insured under policy number \_\_\_\_\_ with \_\_\_\_\_ (company) for sickness and accident insurance. Date of expiration \_\_\_\_\_ (N/A if not applicable); in addition, the student hereby assumes responsibility for all medical expenses incurred by and on behalf of the student while participating in the program.

7. **We understand that programs may not regularly employ health care professionals and make no representation with respect to accessibility of services and facilities. Appropriate treatments, especially psychological, may not be as readily available. The student must, therefore, make provision before departure for the domestic program for continuation of medical treatments such as prescriptions or special diets. The director of the program should be fully informed of any special needs at the start of the program. Duke University can make no representation with respect to accessibility of services and facilities.**

8. In the event (I) (we) cannot be reached to give (my) (our) consent, (I) (we) the parent(s) of the above named student, hereby authorize Duke University's representative to consent for (me) (us) to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care deemed necessary or advisable by a licensed physician during the period the student is enrolled in the Duke program.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of Duke University to give specific consent to the diagnosis, treatment or hospital care which in the best judgment of a licensed physician is deemed advisable.

<b><u>Parent/Guardian</u></b>				
I certify that I am the parent or legal guardian of the student named above; that I have read the entire preceding agreement and I join in all the articles of the agreement without reservation, granting my consent to all actions provided for herein.				
Signature of parent or guardian _____			Date _____	
Printed name of parent or guardian _____				
Address _____				
Number & Street		City	State	Zip Code
Telephone number _____		E-mail _____		
Area Code	Phone number			

Signature of student \_\_\_\_\_ Date \_\_\_\_\_

**The signatures of both a parent or legal guardian and the student are required.** Please sign this form and return it to Global Education Office for Undergraduates, Duke University, Smith Warehouse, Bay 6, 2nd Floor, 114 S. Buchanan Blvd., Box 90057, Durham, NC 27708-0057 (Tel. 919.684.2174, Fax 919.684.3083) by **Friday, April 13, 2012.**