

Appendix B – Student Participation Agreement



The University of Calgary
Global Experience Student Participation Agreement
Please read carefully!

Name of Participant: <<Insert Name In Bold>>

Permanent Address of Participant: <<Insert Address In Bold>>

Name of Program: <<Insert Program Name In Bold>>

(herein after called “the Program”)

Dates of Program: <<Insert Start and End Dates In Bold>>

I, <<Insert Name>>, UCID <<Insert UC ID>> hereby declare that I have read, understand, and agree to the following:

1. I understand that the Program is designed as a learning opportunity. I will strive to maximize my own personal learning while engaging fully with others as they learn. I will attend and actively participate in all Program activities, complete any Program readings and assignments, and conduct myself in a respectful and professional manner as a representative of the University throughout the Program.
2. I will take part in all aspects of the Program including any orientation session, exercise briefings, field activities, seminars and case studies.
3. I will register for the Program and pay any required Program fees, University of Calgary tuition, student fees and the course supplemental fees before the applicable deadlines.
4. I understand that it is mandatory to have valid appropriate medical/health, medical repatriation and repatriation of remains insurance for participation in the Program.
5. I will be a part of the Program’s D2L course, and may choose to be a part of the Program’s Facebook page or blog. I will use these sites for the purposes of the program. I recognize my responsibility to use these sites in positive and constructive manners, to promote the Program, and not to use them in a defamatory manner
6. I agree to abide by any of Program specific expectations as established by the Program’s leader. These expectations may include start and end times of daily activities, curfews, and check-ins with trip chaperones.
7. I acknowledge that I am bound by the rules and regulations of the Program and all University of Calgary policies, including the “Student Non-Academic Misconduct Policy”. I recognize that these policies will continue to bind me during my participation in the Program. If I am found to be in breach of any of these rules, or if my actions are deemed to be harmful to the safety of others, the ability of others to participate, the reputation of the Program, or the reputation of

the University of Calgary, I will be dismissed and required to leave the program. I will be responsible for the costs of safe transit to my return destination and any other costs incurred as a result of the removal. I understand that if I am dismissed from the program, I will not receive a refund of any program or tuition fees. _____ (initial here).

8. I will abide by the laws of the region I am visiting and engage respectfully with other Program participants, community partners, and local community members.
9. I understand that I will be staying in accommodation that is shared with other group members, or with a host family. I will demonstrate respect for my peers, the local host organization, the accommodation provider, other guests, and if applicable, my host family. I will not invite non-Program participants to stay in the accommodation.
10. I understand that each individual, member of the Program or not, is entitled to be treated with dignity and respect. My actions and speech throughout the Program will reflect this at all times while also encouraging diversity and inclusivity. I recognize that I am equally entitled to dignity and respect. Should a situation arise in which I feel I am not being treated in this way, I will address the situation in an appropriate manner after consulting with a Program leader.
11. I recognize that optimal success in this program is supported by my own wellness, and willing to seek support for any health concerns that may arise. This responsibility includes informing the Program leader if I have any health concerns and making use of the support services provided during the Program. As a member of a student community, I recognize the importance of also supporting the wellness of my fellow students.

I have read and accept each of the above responsibilities and voluntarily sign this agreement.

(Signature of participant)

(Signature of witness)

(Date)

(Witness, please print name)