

## STUDENT ROLES AND RESPONSIBILITIES

### **Students (and any additional program participants)**

All participants (faculty, students, and any additional chaperones) on study abroad programs are regarded as ambassadors of goodwill and are representatives of Jamestown Community College, New York State, and the United States. All are expected to act accordingly.

#### **Students will:**

- Attend mandatory pre-departure orientation session(s)
- Participate in all scheduled class/program events and lectures
- **Register with the *Smart Traveler Enrollment Program (STEP)*** prior to departure. The STEP program is a free service provided by the U.S. Government to U.S. citizens who are traveling abroad. STEP allows you to enter information about your trip abroad so that the department of state can better assist you in an emergency. Create an account and register your trip on their website: <https://step.state.gov/step/> Once registration has been completed, please download and print your registration and deliver a copy to the International Outreach Office at JCC. **This is a requirement of every faculty leader and each student traveling with the program.**
- Obtain necessary travel documents such as passport and visas, if required
- Complete all written course work by deadlines
- Conform to JCC's student code of conduct and never behave in a manner detrimental to yourself or others, or harm the integrity or reputation of the program or the college <http://www.sunyjcc.edu/student-services/campus-life/student-responsibilities>
- Follow all guidelines as determined by faculty and international outreach office
- Attend post-travel meetings and be willing to share experiences with other students in classes or assemblies, or in written form that might be used for future promotion

#### **Special Note on Alcohol and Drug Use Abroad**

With many U.S. students abroad, there is a direct correlation between alcohol use and inappropriate behavior. The drinking age is lower in most other countries than in the United States. If a student is of legal age to drink in the host country, he/she will be permitted to do so. However, we encourage all program participants to use moderation and good sense. Alcohol use impairs judgment, which increases your chances of being a victim of crime or sexual assault. Alcohol misuse or abuse will not be tolerated.

Each year, 2,500 Americans are arrested internationally. One-third of the arrests are on drug-related charges. If you are caught with drugs there is very little that anyone can do to help, and often the penalties are much harsher than in the U.S. and may include weeks, months, or life in prison, even the death penalty in a growing number of countries including Malaysia, Pakistan, and Turkey. In some countries, anyone caught with even a small quantity for personal use may be tried and receive the same sentence as the large-scale trafficker. Review the U.S. State Department's special warnings about drug offenses abroad at <http://travel.state.gov/content/passports/en/go/drugs.html>.

JCC's policies on drugs and alcohol are in effect during your study abroad program. Please review those policies on the JCC website: <http://www.sunyjcc.edu/student-services/campus-life/student-responsibilities>

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**JAMESTOWN COMMUNITY COLLEGE**  
**Short-term Academic Programs Abroad**

**STUDENT HEALTH INFORMATION FORM**

Name: \_\_\_\_\_  
Last
First
Middle

Program: \_\_\_\_\_  
Location Abroad
Dates of the program

**To the Student:** The information provided will remain confidential. Be aware that you will be responsible for your own care, though JCC and the organization hosting you internationally will try to provide assistance. Please be honest with yourself and prepare accordingly. The questions that follow will help guide you in preparing for your trip abroad. Indicating that you have health concerns may allow us to assist you in determining if you are prepared to go and can receive appropriate treatment.

1. Do you have or have you had any physical, psychological or emotional conditions (including eating disorders), that might require treatment abroad, or that might be exacerbated by the stress caused by changes in culture, climate, diet or exercise? If yes, explain below and plan to see your health care provider to discuss your care.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Have you arranged to receive all the necessary immunizations and medications recommended for visiting the program site by reviewing information that: <ul style="list-style-type: none"> <li>- may have been provided by JCC;</li> <li>- may have been provided by the program site;</li> <li>- is available on the US Center for Disease Control and Prevention website; and</li> <li>may be available from the government of the countries you will enter?</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Do you have any allergies, reactions to medications, or dietary restrictions? If yes, consider what you may need to manage your condition or restrictions. If needed, see your health care provider for assistance in planning for your care. You may list any allergies or dietary restrictions below so we can inform international providers. However, SUNY can only inform and cannot ensure that you can be protected from exposure.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Are you currently taking or have you recently discontinued any medications you may need while abroad? If yes, list medication name and purpose.  Please consider how you will have access to the medication you need and consult with your physician to develop a plan for managing your condition while abroad. Depending on the medication, JCC may request additional information.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. <b>(Disclosure of disabilities is optional)</b> Do you have a disability for which you are seeking accommodations? If yes, provide a description of desired accommodations. Please be aware that the Americans with Disabilities Act (ADA) does not apply outside the borders of the United States. The Administering Campus will assist you, to the extent possible, to obtain the accommodations you may want; however, it may not be able to obtain the accommodations necessary to enable you to participate in all aspects of the study abroad program.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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6. Person to notify in case of emergency, illness or accident:

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_  
Street/Apt #: \_\_\_\_\_ Daytime Telephone #: (\_\_\_\_) \_\_\_\_\_  
City, State, ZIP: \_\_\_\_\_ Evening Telephone #: (\_\_\_\_) \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Cell Telephone #: (\_\_\_\_) \_\_\_\_\_

Second person in the event that the above cannot be reached:

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_  
Street/Apt #: \_\_\_\_\_ Daytime Telephone #: (\_\_\_\_) \_\_\_\_\_  
City, State, ZIP: \_\_\_\_\_ Evening Telephone #: (\_\_\_\_) \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Cell Telephone #: (\_\_\_\_) \_\_\_\_\_

### Student Declaration

I grant Jamestown Community College/State University of New York, its employees, agents and international partners permission to share information concerning my health condition with program representatives, my family, insurance company representatives and with any physician, psychologist, or counselor who treated me during the past five years or is now treating me. In situations where I am unable to give oral or written consent, I grant permission for hospitalization and treatment recommended and carried out under the supervision of a qualified physician, including administering anesthetics and performing necessary surgery at my own expense. I appoint the representative of JCC in the host country for the program to act on my behalf in authorizing necessary medical, dental or surgical care, hospitalization or medical evacuation for me should this be required.

I certify that all responses made on this form are true and accurate, and that **I will notify JCC hereafter of any relevant changes in my health that occur prior to the start of the program.**

\_\_\_\_\_  
Student's Signature Date

\_\_\_\_\_  
Parent/Guardian's Signature (required if student is under 18 years of age) Date

**If you answered yes to 1, or 4, or no to 2 please make an appointment with your health care provider to review your medical history and travel plans and have him/her sign below.**

**To the Treating Clinician: Please review the student's medical history, discuss with him/her the upcoming international study plans and sign below. A physical exam is not required by JCC if you have adequate information to advise the student.**

I have reviewed this student's medical history and examination with him/her, consulted with him/her about vaccinations and medications that may be required, and developed a treatment plan for the student to manage his/her condition during the study abroad program, if needed. (Attach pages as necessary.)

\_\_\_\_\_  
Signature of Provider Printed Name of Provider

\_\_\_\_\_  
Address and Phone Number of Provider

\_\_\_\_\_  
Student Initials



**A. I acknowledge that I am aware that there are risks involved in participation in a study abroad program and that I am willing to assume those risks.**

By my signature below, I certify that I understand and hereby acknowledge that:

1. My participation in the program will require transportation to and habitation in another country and may involve my being subject to risks relating to travel or arising out of program activities, and
2. I have, as advised by the program's acceptance materials, reviewed the U.S. Consular Information Sheets and Travel Warnings [contained on the U.S. Department of State Consular Affairs web site] and the Travelers Health section of the Center for Disease Control's web site, and by those means, been informed of such risks. I have diligently endeavored to learn about the country or countries and specific locations within those countries I will visit so as to be aware of the health and safety risks that I may face. I hereby assume, knowingly and voluntarily, each of these risks and all of the other risks that could arise out of or occur during my travel to, from, in or around the country in which this program is located.
3. I release JCC/SUNY, its officers, trustees, employees, and agents from any and all liability, damage or claim of any nature arising out of, or in any way related to my participation in this program, the transportation, or health care that may be provided, or in any independent activities that I may undertake during my participation. I understand that this means that I cannot hold JCC/SUNY /legally responsible, even if its negligence contributes to any injuries or damages that I may suffer.

**B. I acknowledge that I have appropriate insurance coverage, will be prepared to pay expenses not covered by insurance, and will disclose pre-existing health issues, and will ascertain the need for and obtain necessary vaccinations and recommended medications.**

By my signature below, I certify that I understand and hereby acknowledge that:

1. JCC requires that all students participating in an study abroad academic program be covered by appropriate accident and medical insurance and that the participants be financially responsible for such expenses. JCC may require the purchase of a health insurance policy specifically approved by JCC as a condition of participation in a program;
2. I will be covered for the duration of the program and for any pre- or post-program travel by a comprehensive health and accident insurance policy which provides coverage for injuries and illnesses I sustain or experience while studying abroad, and, more specifically, in the country in which I will be living and/or traveling while on the program;
3. I understand that payment for medical expenses while studying abroad may have to be advanced and reimbursement sought later from an insurance carrier;
4. I understand that my program abroad will be rigorous and demanding, and that students with

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emotional issues are advised to consult with their counselor prior to the program regarding their participation.

5. I absolve *JCC and SUNY* of all responsibility and liability for any injuries (including death), illnesses, claims, damages, charges, bills and/or expenses I may incur while I am abroad;
6. I understand that *JCC* requires that participants planning to operate a motor vehicle while in another country obtain liability and collision insurance that will cover them in applicable foreign countries;
7. I understand that *JCC* also recommends that participants in study abroad academic programs insure their property from loss and theft.
8. I agree to report to *JCC* any physical or mental condition I have which may require special medical attention or accommodation during the program as soon as possible.
9. As advised by the program's acceptance materials, or the Travelers Health section of the Center for Disease Control's internet page, or my doctor, I have ascertained the recommended vaccinations and medications for the area I will be traveling to and I am solely responsible for securing any necessary immunizations prior to departure and for obtaining recommended or required medications needed while abroad.

**C. I absolve and release *JCC and SUNY* from liability for things and events that arise out of, result from, occur during, or are connected in any manner with my participation in the program and/or any travel incident thereto.**

By my signature below, I certify that:

1. I, individually, and on behalf of my heirs, successors, assigns, and personal representatives, hereby agree to indemnify, defend, hold harmless, release and forever discharge *JCC, SUNY* and its employees, agents, officers, trustees, and representatives (in their official and individual capacities) from any and all liability whatsoever for any and all damages, losses or injuries (including death) I sustain to my person or property or both.
2. I understand and acknowledge that *JCC* in no way represents or acts as an agent for transportation carriers, hotels, and other suppliers of services connected with this program and that *JCC/SUNY* assumes no responsibility or liability, in whole or in part, for any problems, delays, or damages caused by such parties or events beyond *JCC/SUNY's* control, such as weather, criminal activity, or civil unrest.
3. I understand and acknowledge that in the event that I become detached from a trip group, fail to meet a departure bus, airplane or train, or become sick or injured, I will bear all responsibility to seek out, contact and connect with the group at its next available destination; and that I shall bear all costs involved in contacting and reaching the trip group at its next

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available destination.

4. I understand and acknowledge that if, due to weather, flight schedules, or other uncontrollable factors, I am required to spend additional nights, *JCC/SUNY* will not be responsible for my hotel, transfers, meal costs, or other expenses; and
5. I understand and acknowledge that my baggage and personal property are transported at my risk entirely and, as noted above, *JCC* also recommends that participants in study abroad academic programs insure their property from loss and theft.
6. I release *JCC/SUNY*, its officers, agents, and employees from any and all liability, damage or claim of any nature whatsoever arising out of, or in any way related to my participation in this program, including but not limited to the medical authorization given to *JCC/SUNY*, acts of God, acts or omissions of any third parties (including but not limited to common carriers, hotels, restaurants, host families, or international organizations, or other firms or agencies); and
7. I indemnify and hold harmless *JCC/SUNY*, its officers, agents, and employees from any damage or liability incurred as a result of any illness I may suffer, including the costs of any medical care, or any injury or damage to the person or property of others which I may cause, or from any financial liability or obligation which I may personally incur, while participating in the program.
8. I understand and acknowledge that it is my responsibility to determine and meet prerequisites for classes I hope to take in the program and I understand and acknowledge that *JCC/SUNY* cannot guarantee me placement in classes at an international institution and indemnify and hold *JCC/SUNY*, its officers, agents, and employees harmless from any damage or liability incurred due to the inability to enroll in or cancellation of, or my failure to complete with a satisfactory grade a class at an international institution.

**D. I acknowledge that I am aware that *JCC* has the right to cancel or make changes to the program.**

By my signature below, I certify that I understand that:

1. *JCC* reserves the right to make changes to the program at any time and for any reason, with or without notice, and that *JCC* shall not be liable for any loss whatsoever to me by reason of any such change;
2. *JCC* reserves the right to substitute hotels, accommodations, or housing at any time. Specific room and housing assignments and types of housing assigned when arrangements are made by *JCC* are within the sole discretion of *JCC*;
3. *JCC* reserves the right, at its sole discretion, to cancel the program or any aspect thereof for any reason prior to departure; and, at *JCC*'s sole discretion, to cancel the program or any

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aspect thereof for any reason after departure, requiring that all participants return to the United States. In the event that a program is cancelled after the start of the program, *JCC* will refund only uncommitted and recoverable funds.

**E. I acknowledge that I am responsible for my conduct during the period of my participation in this program, am responsible for following through on acceptance and post participation procedures, and am responsible for paying for the program and any related or unrelated costs I may incur.**

By my signature below, I certify that:

1. In regard to my conduct while a participant in this study abroad program I understand that:
  - a. All participants in the program are subject to the *JCC*'s regulations and guidelines (including but not limited to those contained in other orientation materials), *SUNY* and *JCC*'s code of conduct, the host university's regulations and guidelines, as well as the laws of the host country. I agree to obey those rules, guidelines, regulations, codes, policies, and laws.
  - b. *JCC* reserves the right to decline to accept or retain me in the program at any time should my actions or general behavior impede the operation of the program or the rights or welfare of any person. Similarly, if my conduct violates any policy or procedure of *JCC* or the laws of the host institution or host country, I understand that I may be required to leave the program at the sole discretion of *JCC*'s employees, agents and representatives, and I may be referred to the appropriate *JCC* officials for further disciplinary or other action. In such an event, no refund will be made for any unused portion of the program and I will return to the United States at my own expense. Further, I understand that I am responsible for any expenses that others may incur due to my actions.
  - c. *JCC/SUNY* is not responsible for the defense of a participant accused of a violation of the laws of the host country or rules of the host institution or organization and is not responsible for the payment of any fines or other penalties resulting from such violations. I agree to be responsible for any damage or liability incurred as a result of any illness or accident I may suffer, including the costs of any medical care not covered by insurance, or any injury or damage to any person or property of others which I may cause, or for any financial liability or obligation which I may personally incur, while participating in the program.
2. As a participant in this study abroad program, I pledge to conduct myself in a manner that reflects favorably on *JCC*, on *SUNY*, the State of New York, the United States of America, and myself.
3. I understand and acknowledge that the manufacture, distribution, possession, use, or sale of controlled substances as defined by New York State and/or U.S. Federal Law, and/or the laws of the host country is prohibited during study abroad. I understand that I will be directly subject to the laws and legal procedures of the host country and host organization as applied to the use, possession and distribution of illegal drugs, and these will be strictly enforced by local authorities.

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4. I understand and acknowledge that I am solely responsible for ascertaining the lawful age for the possession or consumption of alcoholic beverages in the host country and for my conduct in compliance with local laws as enforced by local authorities. I understand that abuse of alcohol even in my free time may be grounds for my dismissal from the program.
5. I agree to participate fully in all portions of the program, and further agree that any deviation from the design of the program's content or format must be approved by *JCC*.
6. I understand and acknowledge that in order to secure my courses/tutorials and/or housing placement at my international host institution, I may be required to submit the appropriate forms to both the International Office at *JCC*, and to the appropriate office(s) at the international institution if applicable, in a timely manner as specified in acceptance materials by any deadlines noted, and I am personally responsible for any damage or liability incurred as a result of my failure to follow instructions, return necessary required forms, or take any necessary actions required or recommended by *JCC* or my host institution.
7. I am aware of the nature and the cost of the program. I agree to pay the Program Fees, Tuition, Differential, or other charges that were specified on the program budget or Estimate of Costs that I received with my offer of admission and will guarantee that all financial obligations will be met by the deadline(s) specified on the bill statement. If I am a financial aid recipient, I will submit all documentation required by *JCC*'s Financial Aid Office and will either remit any balance owing by the payment deadline(s) or arrange for a deferment of payments with the appropriate offices.
8. I understand and acknowledge that if I withdraw before the start of the program I will be responsible for paying any part of those costs that cannot be recovered by *JCC* or that *JCC* may still be required to pay on my behalf. If I withdraw from the program after its starting date, I will not expect to receive a refund of any program fees, differentials, or other charges and, depending on the rules of the host university, may not receive a refund of *JCC* tuition. I may also be obligated to repay any financial aid awards that I received in support of my participation in the program.
9. I acknowledge that I have read the orientation materials and understand its content. I agree to abide by the guidelines, rules, and procedures described and outlined in any program specific materials provided or directed to be read online. I also agree to abide by any rules and procedures that may be provided by faculty or staff involved in the organization, implementation, and delivery of the program.
10. I agree to complete all the academic work required by my program or host university before the end of my study abroad term/semester/session, or academic year, whichever is applicable, and to remain on site until that date.
11. I understand and acknowledge that it is my responsibility to determine if I must request from my international host that a statement of my academic work be forwarded to the International Outreach Office at the end of my program and if so I will comply with the international host's instructions.

**F. I give permission for photographs of me and statements by me to be used in publicity materials.**

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I give my consent for *JCC*, and agencies, organizations, and individuals cooperating with *JCC* in the administration of the program to use images of me or written statements from me in promotional and informational materials. I hereby irrevocably authorize *JCC* to copy, publish, exhibit or distribute in any legal manner, any and all images, videos, audio recordings and electronic or digital recordings in which my likeness appears. I further waive any right to inspect or approve any advertisement, publication, or information piece in which my likeness appears. I hold *JCC/SUNY* harmless and release and discharge *JCC/SUNY*, its employees and agents, from any claims, demands, or causes of action which I, my heirs, representatives, executors, administrators or other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

**G. I authorize the release of my student, health, and insurance records as described below.**

**According to the provisions of Public Law 93-380 (20 USC 1232g-Family Educational Rights and Privacy Act of 1974) and laws concerning the use of medical records commonly referred to as HIPPA, and in connection with my participation in the study abroad program indicated above, I hereby authorize the International Outreach Office and its officers, agents, and employees, the Office of the Registrar, the Office of Financial Aid, the Office of Judicial Affairs, or any other office of *SUNY*, representatives of my home campus, representatives of my insurance providers, medical staff in whose care I may be, the staff of the organization or institution I am attending outside the U.S., to communicate with each other and with my parents or guardian or others whose names I provided in my application or on my Emergency Contact list and provide to them or receive from them any academic, medical, or financial information deemed appropriate to assist with health care, to ensure continuation of enrollment at my home university, or enrollment in insurance (e.g. enrollment verification or other similar documents) or for any other purpose deemed appropriate to ensure my health and safety in, facilitate financing my participation in, and ensure the receipt of academic credit for my program, including the release of an academic transcript to my home campus upon program completion to an address I provide.**

**I understand that copies of the medical and academic records submitted as part of my application or acceptance procedures may be provided to the international program staff or the international institution that I will attend and, though we request that all records be kept in the strictest confidence, once sent, these records will be subject to the laws of the country they reside in. I waive any requirement that I be furnished a copy of these records prior to or concurrent with their release.**

This *Agreement/Release Form* remains effective until my relationship with *JCC/SUNY* is terminated, judicial actions resolved, financial accounts are settled, and grades recorded, with the exception of Section F, which remains in force until rescinded in writing for specific images or quotes.

I agree that the terms of this *Agreement/Release Form* are to be construed under the laws of the State of New York, and that if any portion thereof is held invalid, the balance thereof shall, notwithstanding, continue in full legal force and effect. In signing this document I hereby acknowledge that I have read this entire document, that I understand its terms, that by signing it I am giving up legal rights I might otherwise have, and that I have signed it knowingly and voluntarily.

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I hereby acknowledge that I have read, understand, and will abide by each of the terms and conditions of this *Agreement/Release Form* and terms of participation.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FULL NAME (printed): \_\_\_\_\_

PARENT or GUARDIAN'S SIGNATURE (if under age 18) \_\_\_\_\_

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