



**LOCAL/STATE/NATIONAL/INTERNATIONAL VOLUNTEER OPPORTUNITY PROGRAM
STUDENT CONTRACT**

Student Name: _____
QCC ID #: _____
Date of Birth: _____
Volunteer Opportunity Program Name: _____

The Student named above agrees as follows:

- I. **Learning Conditions.** Students are responsible for making travel plans which will permit them to attend all regularly scheduled volunteer activities and field trips.

A.Application Process. I am aware that Quinsigamond Community College officials consider a variety of academic, health, behavioral, financial and safety issues in evaluating the appropriateness of an individual's participation in a Quinsigamond Community College Local/State/National/International Volunteer Opportunity Program, and that the College reserves the right to decline any application. I authorize the release of all of my academic and disciplinary records to the Program Coordinator responsible for the Program for which I am applying and the Dean of Students.

B.Program Application. I have complied with Quinsigamond Community College and have reviewed and signed all necessary documents and have submitted them, in a timely manner, to the Program Coordinator for a decision on acceptance.

C.Program Participation. I understand that students accepted to Quinsigamond Community College Volunteer Opportunity 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 Quinsigamond Community College.

- II. **Assumption of Risk and Waiver of Liability.** This portion of the Quinsigamond Community College Local/State/National/International Volunteer Opportunity Program Student Contract involves a release of certain legal rights. Be sure to read and understand it before signing.

A.Risks of Volunteer Opportunities. I understand that participation in the Quinsigamond Community College-approved Volunteer Opportunity Program specified above (the "Program") involves risks not found in study at the College. These include risks involved in traveling to and from Quinsigamond Community College, medical and weather conditions. Some Volunteer Opportunity Programs require one to travel within, and return from, possibly 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 College's insurance), as well as other matters. I have made my own investigation and am willing to accept these risks.

B. Institutional Arrangements. I understand that the College 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 Program. I understand that the College has exercised its best efforts in regard to these matters, but that it is not responsible for occurrences that are beyond its control. I release the College from liability for any injury, loss (including loss of luggage or other personal property), damage, accident, delay or expense arising out of any such matters.

C. Independent Activity. I understand that the College is not responsible for any injury or loss I may suffer when I am traveling independently or am otherwise separated or absent from any College-supervised activities.

D. Health and Safety.

1. I have consulted with a medical doctor with regard to my personal medical needs. I have provided the College with all medical data and any other personal information necessary for a safe and healthy Volunteer Opportunity 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 have secured health insurance coverage to meet any and all needs for payment of medical costs (if necessary including those incurred outside the United States) while I participate in the Program. I recognize that, while the College 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 College to secure any necessary care deemed appropriate. I am aware that a separate Student Health Questionnaire must be signed prior to participation in the Program.
3. The College (including the Program Coordinator and all Supervisors responsible for leading the trip or supervising the Program, acting in his/her own absolute discretion) may take any actions considered to be warranted under the circumstances to protect my health, safety, or welfare or the health, safety, or welfare of others participating in the Program. These actions may include my removal from the Program or the removal of other Program participants. If I am removed from the Program, I understand that I will be sent home at my own expense with no refund of fees. I agree to communicate any health, safety, or welfare concerns promptly to the Program Coordinator and Supervisors.
4. **Information for students with disabilities who may require accommodation:** Quinsigamond Community College 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 countries. The College does not discriminate on the basis of disability in admissions for Quinsigamond Community College Local/State/National/International Volunteer Opportunity Programs, but is not responsible for assuring accessibility in international locations and cannot guarantee that accommodation will be available. While the College 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, College policy requires students with special needs who require accommodation to self-identify at the time of application for participation in a Quinsigamond Community College Local/State/National/International Volunteer Opportunity Program experience. These students must notify the Disability Services office of their interest in participating in a Quinsigamond Community College Local/State/National/International Volunteer Opportunity Program and of their need for accommodation. The Director of Disability Services will meet with the student, the Program Coordinator and the Dean of Students to determine whether the student's needs can be accommodated.

E. Standards of Conduct.

1. I understand that each State as well as 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 College'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.
2. I also will comply with the College's rules, standards, and instructions for student behavior. I waive and release all claims against the College that arise at a time when I am not under the direct supervision of the College or that are caused by my failure to remain under such supervision or to comply with such rules, standards and instructions.
3. I agree that the College 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 College, 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 the College 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 with no refund of fees.
4. I agree that I will not operate a motor vehicle of any kind while participating in the Program. I further 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): scuba diving, skiing, mountain climbing, sky-diving, hang gliding, glider flying, parasailing, piloting an aircraft, bungee jumping, and any other like activity normally considered to be ultra-hazardous or regarded as an "extreme sport."
5. I will attend to any legal problems I encounter with any local, state, federal, foreign nationals or government at my own expense. I understand that, while the College will use its best efforts to assist me, it is not responsible for providing me with legal representation.

6. I understand that during time designated for independent travel before, during or after the Program, I may have the option to travel at my own expense. I agree to inform the Program Coordinator of my travel plans, understand that the College 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.

- F. **Program Changes.** The College has the right to cancel the Program at any time prior to departure, in which case all monies paid will be refunded in full. It also reserves the right to cancel a Program in progress and to require all participants to return to Quinsigamond Community College if it determines that conditions pose a heightened potential of danger to students. I understand that the College may alter the Program's itinerary, travel arrangements, or accommodations due to emergency or changed conditions, and agree to be responsible for additional costs. I understand that the College's fees and program charges are based on current airfares, lodging rates and travel costs, which are subject to change. If I leave or am removed from the Program, I will receive no refund of fees already paid. Understanding that the College 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 become separated from the Program group or 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.
- G. **Assumption of Risk and Release of Claims.** Knowing the risks described above, and in consideration of being permitted to participate in the Program, I agree, on behalf of my family, heirs, and personal representatives, to assume all the risks and responsibilities involved in my participation in the Program. I release and agree to indemnify Quinsigamond Community College, its officers, employees and agents, from and against any present or future claim, loss or liability for injury to person or property which I may suffer, or for which I may be liable to any other person, during my participation in the Program (including periods of travel), except for such injury as may be caused by the gross negligence or willful misconduct of Quinsigamond Community College.

**LOCAL/STATE/NATIONAL/INTERNATIONAL VOLUNTEER OPPORTUNITY PROGRAM
STUDENT CONTRACT SIGNATURE PAGE**

I have read this Quinsigamond Community College Local/State/National/International Volunteer Opportunity Program Student Contract carefully before signing it, and agree that it contains my entire agreement with Quinsigamond Community College as to my participation in the Local/State/National/International Volunteer Opportunity Program. This agreement shall become effective only upon acceptance by the College of my application for the noted Volunteer Opportunity Program, and shall be governed by the laws of the Commonwealth of Massachusetts.

STUDENT SIGNATURE: _____
PRINT NAME: _____
DATE OF BIRTH: _____
STREET ADDRESS: _____
CITY/TOWN, ZIP CODE/ COUNTRY: _____
DATE: _____

SIGNATURE OF PARENT(S)/LEGAL GUARDIANS(S) REQUIRED IF STUDENT IS UNDER EIGHTEEN (18).

I am the parent or legal guardian of the Student, have read the foregoing Quinsigamond Community College Local/State/National/International Volunteer Opportunity Program Student Contract, am and will be legally responsible for the obligations and acts of the Student, and agree for myself and the Student to be bound by the terms of this Contract.

SIGNATURE OF PARENT/GUARDIAN # 1: _____
PRINT NAME: _____
STREET ADDRESS: _____
CITY/TOWN/ZIP CODE/COUNTRY: _____
DATE: _____

SIGNATURE OF PARENT/GUARDIAN # 2: _____
PRINT NAME: _____
STREET ADDRESS: _____
CITY/TOWN/ZIP CODE/COUNTRY: _____
DATE: _____