**Student Statement of Responsibility**

I. I acknowledge that participation in a study abroad program involves some risk of injury, illness, or loss of personal property. I have read the International Education Center’s (IEC) Student Handbook and understand that I am responsible for my day-to-day choices and behaviors regarding my health and safety during the program. I have also read and understand the Savannah State University (SSU) Code of Conduct and Housing Policy remain in effect when I travel abroad.

2. I understand that as an American citizen in a foreign country, I will be subject to the laws of that country. I understand that being charged with any infraction of the laws of the host country is grounds for immediate expulsion from the program without refund. In addition, I understand that should I have any legal problems in the host country that I will be responsible for any legal costs incurred.

3. I agree that I will be fully responsible for any and all expenses, including transportation costs, associated with or in any way related to medical care. I am responsible for bringing and administering any prescribed medications. I further certify that, to the best of my knowledge, I am in good health and physically capable of undertaking a study abroad program. Any medical or health-related problems have been disclosed on the Health Information and Emergency Treatment Form.

4. I understand that if I become detached from the group due to failure to comply with directions given by the program manager, I will bear all responsibility to find and reconnect with the group at the next destination. I understand that I will incur all the costs involved in contacting and reaching the group.

5. I agree that I shall be subject to the supervision and authority of the program manager and to the SSU’s Student Code of Conduct and Housing Policies. I further acknowledge that the program manager has the sole authority to make decisions regarding disciplinary actions.

6. I understand that if my program participation is terminated due to disciplinary actions, I will not receive a refund of program fees. If I am dismissed before the completion of the program, I understand I will be responsible for any and all expenses associated with my return home. I also understand that if I leave the program voluntarily, I will be responsible for any cost associated with my return home and that no fees will be refunded.

7. I authorize SSU to communicate with the contact person(s) provided in my application materials in the event of an emergency.

8. I understand that during non-class time, I may elect to travel independently at my own expense. I agree to inform the program manager of my travel plans and understand that neither SSU nor program staff are responsible for me while I am traveling independently during such free time.

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Signature of Participant Date

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Name of Participant (Print)