



VITERBO STUDY ABROAD PROGRAM LEADER AGREEMENT

If selected, I, _____, an employee of Viterbo University (Viterbo), have agreed to the following terms and responsibilities as a Program Leader of the _____ (program location) study abroad and/or study away program in _____ (program semester and year). In consideration for being selected as a program leader, I hereby agree and represent that:

- 1. Program Planning and Development.** I understand that leading or co-leading a study abroad/away program can take a significant amount of organizing, planning, and time to fully prepare. I understand I will work in coordination of the Study Abroad Office to ensure the highest quality program is being offered to our students. I agree to help with the promotion and requirements of participants for this program.
- 2. Study Abroad/Study Away Policies.** I acknowledge that I am responsible for understanding and adhering to the Viterbo Study Abroad policies and procedures as outlined on the Viterbo University Study Abroad website, as well as host intuition/ program provider policies (if applicable), U.S. and host country laws. I understand that I am responsible for enforcing the student Study Abroad and/or Study Away Agreement, Code of Conduct and Release and Waiver of Liability as a program leader of this program. I recognize I am responsible for informing the Study Abroad Office of a policy violation as soon as possible. I understand that I am to comply with the Family Education Rights and Privacy Act (FERPA), Americans with Disabilities Act (ADA), Health Insurance Portability and Accountability Act (HIPPA) and other higher education regulations, even if the host country does not have or recognize these laws and regulations.
- 3. Viterbo's Right to Alter Program.** I understand that, although Viterbo will attempt to maintain the Program as described in its publications and brochures, it reserves the right to change the Program, including the duration, curriculum, itinerary, travel arrangements, vendors or accommodations, at any time and for any reason, with or without notice, and that Viterbo, its Board, or its employees and agents, shall not be responsible or liable for any expenses or losses that I may incur because of these changes.
- 4. Release of liability.** I understand that, although Viterbo has made every reasonable effort to assure my safety while participating in the Program, there are unavoidable risks in international and domestic travel. For and in consideration of the opportunity to participate in the Program involving travel and study outside the United States of America, I, being of lawful age and under no legal disability, on my own behalf, as well as on behalf of my heirs, executors, administrators and assigns, do hereby release Viterbo, the Board and their employees, officers and agents, from any liability, cause of action, demand for damages, expenses, compensation and claim on account of or in any way growing out of personal injuries, death or property damage which may result from my participation in the Program. I further expressly waive my right to bring a legal action of any kind for any of the claims released. I realize that travel and study outside the United States of America involves risk of personal injury, death, or property damage. Some of the risks which I specifically acknowledge are the risk of travel mishaps, such as motor vehicle collisions and plane crashes; natural disasters, such as earthquakes and floods; contagious

disease; animal attack; insect and animal bites; acts of civil disobedience or terrorism; criminal acts, such as assault, kidnapping and theft; observation of and participation in sports and recreational activities. I assume personal responsibility for the consequences of the exemplar risks and all other potential hazards, which may arise in connection with my travel or study abroad, which may result in injury, death, or damage to property.

5. **Medical agreement and release.** If an emergency develops which requires immediate medical care, I authorize representatives of the program to secure any necessary treatment, including hospitalization and/or the administration of an anesthetic and surgery.
6. **Experience.** I acknowledge it is my responsibility to be as informed as possible regarding the location and culture I am entering into, including, but not limited to: country or location history, cultural practices and norms, health resources, safety resources, potential hazards, local customs and laws, areas to avoid, political unrest, and current events.
7. **Finances.** I understand that I may be entrusted with a cash advance prior to travel to help cover on-sight expenses. I recognize that I am responsible for managing these expenses and that I will be required to turn in all receipts and leftover monies upon return to Viterbo. I understand I will not be reimbursed for personal purchases (souvenirs, gifts, luggage, etc.), and/or alcoholic beverages.
8. **Personal.** I recognize that leading or co-leading a program is part of my contract in teaching this course. I understand this opportunity is viewed as an educational experience and not a vacation, therefore, I acknowledge my family and/or friends are not allowed to accompany me or the group at any time during the travel portion of this program. I understand I am to be reachable 24/7 to students while on the program in case emergencies arise. I also understand the need to be in good physical, mental and emotional health as these programs can be intense experiences.
9. **Program Leader Orientation.** I understand I am required to attend all program leader orientation meetings as scheduled by the Study Abroad Office. These meetings will cover crucial information including, but not limited to: risk management, emergency responses, budgeting, best practices, case studies and various resources. I acknowledge that failure to attend these meetings and make other arrangements to meet with the Study Abroad Office may result in my removal from the program.

I acknowledge that I have read, understand and will abide by each of the terms and conditions of this Agreement. I understand it fully and execute it voluntarily as a condition of my participation as a program leader in the Program.

Signature _____

Date _____

APPROVAL

DEAN APPROVAL

**Items to consider at dean level: appropriateness of faculty to program, past course evaluations, personality characteristics, connection to students, course/workloads, commitment to program, etc.*

College Name (in which the program will reside): _____

Dean of College (Printed Name): _____

Dean of College Signature: _____ Date: _____

STUDY ABROAD OFFICE APPROVAL

**Items to consider from SAO: prior experiences in study abroad, past program evaluations (if applicable), global and cultural competency, commitment to program, etc.*

Coordinator of Study Abroad (Printed Name): _____

Coordinator of Study Abroad Signature: _____ Date: _____

VICE PRESIDENT FOR ACADEMICS (VPA) APPROVAL

VPA (Printed Name): _____

VPA Signature: _____ Date: _____