

## Student Consent for Participation in the Program

It is my responsibility to learn as much as possible about the risks of the student exchange/internship program, to weigh these risks against the advantages, and to decide whether or not to participate. I must notify the International Education Centre at Mount Saint Vincent University (MSVU) if I no longer wish to participate in the student exchange/internship program. It is my responsibility to research the necessary paperwork (visas, permits, entry clearances, etc.) which are required by the country I am entering and to apply for these well in advance of departure at the appropriate consulate or embassy. Before going, I must check with my department as to how course selection and load requirements during the internship will fit into my program at MSVU.

I hereby recognize that participation in an internship/student exchange program is contingent upon payment of tuition and related fees to MSVU assessed on the number of credits being registered in for the semester abroad. Tuition fees are payable before departure by the deadline set by the Registrar's Office. I acknowledge that I may not be able to get credits towards my degree for student exchange/internship activities abroad without approval from my program Chair. This may necessitate taking additional semester(s) at MSVU (and paying the applicable tuition and fees) in order to fulfill my degree requirements. It is my responsibility to ensure the accuracy of my record, to inform the University and my faculty of any discrepancies in my academic record, and to update my mailing address on my record as appropriate.

Finally, I understand that anonymous statistics relating to gender, proposed host university, field and level of study of successful and unsuccessful applicants may be compiled by the International Education Centre at MSVU for release for legitimate academic, reporting and publicity purposes.

I certify that all statements made on this application form are true and complete.

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Outgoing Exchange Student Signature

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Date (DD/MM/YYYY)

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International Projects and Exchange Program Coordinator Signature

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Date (DD/MM/YYYY)

## Medical Information

Family doctor information	
Family doctor's name:	Doctor's telephone number:
Doctor's address:	Medical conditions (if any):

### Declaration:

1. I declare that I have disclosed all available information requested on this form and that the information is true, complete and accurate.
2. I consent to the disclosure by Mount Saint Vincent University (MSVU) of personal information including the information that I have given on this form:
  - a) to the exchange partner administrator, university administrators, Government of Canada Foreign Affairs officials (SOS services), or medical professionals for emergency purposes; and
  - b) to the person(s) I have appointed as my Emergency Contact(s) in case of emergency.
3. I declare that I will purchase Insurance Coverage through Guard.me for my exchange period and provide proof to the International Education Centre.
4. I declare that I will adhere to all pre-departure processes outlined in the Pre-Departure Guide I have been supplied with. This is including but not limited to the submission of passport photocopy(ies), travel itinerary, and health insurance documentation to the International Education Centre, meeting the financial requirements of MSVU, and completing the Registration of Canadians Abroad.

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Outgoing Exchange Student Name (Please Print)

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Outgoing Exchange Student Signature

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Date (DD/MM/YYYY)

## Program Participation and Code of Conduct

While abroad, students are subject to the rules and regulations (and/or student code of conduct) of the host institution and the student's home institution, and the laws of the host country. Mount Saint Vincent University (MSVU) student code of conduct is covered under MSVU's Student Travel Policy, and the Non-Academic Discipline Policy. It is the responsibility of the student to read the above-mentioned codes of conduct and policies before commencing the internship/exchange.

As an ambassador of MSVU, each student is expected to be of exemplary behavior at all times while at the host institution. The student behavior should be reflective of the code of conduct required by the student's home university and that of the overseas host institution. Inappropriate behaviors and violations of the code of conduct may result in termination of the student's participation in the program and disciplinary action upon return to MSVU in accordance with MSVU Non-Academic Judicial Policy.

Examples of violations abroad that could result in termination of your program are:

- Violations of laws, rules and regulations of the host country or institution
- Behaviour that gives the International Education Centre cause to believe that the continued presence of the student constitutes a danger to the health and safety of themselves, persons, or property or would be of detriment to the group and reputation of the program
- Alcohol misuse or drug use
- Repeated bad behaviour for which the student has been warned in writing

In the event of the termination of the student's participation in the program, the student:

- May not receive academic credit for the program;

By signing below, I confirm that I understand and agree to the above.

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Outgoing Exchange Student Name (Please Print)

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Outgoing Exchange Student Signature

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Date (DD/MM/YYYY)

## Responsibility and Liability Waiver

**WARNING: By signing this document you give up certain legal rights, including the right to sue.**

**Please read carefully.**

In consideration of being permitted to conduct study/work at \_\_\_\_\_  
[Host Institution/Country] by Mount Saint Vincent University (MSVU) in Halifax, Nova Scotia, I agree as follows:

**Assumption of Risks:** I understand that participation in an MSVU Study/Work Abroad Program/Research Trip (the program) will take me away from campus for an extended period of time. During this period, I understand that I will be in unfamiliar surroundings and will be exposed to risks to my person and possessions. I understand that I may suffer physical injury, sickness or death, or damage to my property as a result of my participation in the program; and that there is a possibility of violence and crime, civil unrest, homesickness and loneliness. I freely and voluntarily accept and assume all such risks, dangers and hazards. Accordingly, I understand that despite its efforts, MSVU may not be able to ensure my complete safety at all times from such risks and dangers.

**Assumption of Responsibility:** I understand that it is my responsibility to abide by all applicable Mount and Host Institution policies and laws of the host country, and to ensure that I have adequate medical, personal health, dental and accident insurance coverage, as well as protection of my personal possessions. More particularly, I understand that MSVU does not carry accident or injury insurance for my benefit and also that there may be certain matters for which I could be held at fault personally if the accompanying circumstances do not relate to or arise from my participation in the program or if my activities or conduct are inappropriate. In these cases, I agree to be accountable in all respects for my own actions and not to ask MSVU or its employees to accept the consequences thereof; further, I agree to be responsible for any claims made against MSVU in relation to such actions. I acknowledge that I have been advised by Mount of such risks and dangers, as well as the need to act in acceptance of these realities and in consideration for being permitted by MSVU to participate in the above-mentioned Program. I recognize that MSVU will not supervise any of the host institution academic program, living arrangements or extracurricular activities during my participation in the Program.

**Liability Waiver:** I release and hold harmless MSVU, its employees, students and agents from any and all liability for any loss, damage, injury or expense that I or my next of kin may suffer as a result of my participation in this Program, including, but not limited to, accidents, acts of God, war, civil unrest, sickness, transportation, scheduling, government restrictions or regulations, and any and all expenses which I may incur while participating in the Program. I understand that this agreement cannot be modified or interpreted, except in writing by MSVU and that no oral modification or interpretation

shall be valid. This agreement shall be effective and binding on my heirs, next of kin, executors, administrators and assigns, in the event of death.

**I have read this document carefully and I acknowledge my responsibilities and the effect of this liability waiver.**

\_\_\_\_\_  
Outgoing Exchange Student Name (Please Print)

\_\_\_\_\_  
MSVU Student ID

\_\_\_\_\_  
Outgoing Exchange Student Signature

\_\_\_\_\_  
Witness Name (Please Print)

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date (DD/MM/YYYY)