## General Rowan-Affiliated Business and Academic Travel Waiver Statement of Responsibility, Waiver, Release and Indemnification Agreement for Students, Faculty and Staff

I have agreed to participate in a Rowan-affiliated international program/travel ("the Program") sponsored by or affiliated with Rowan University ("Rowan") in the location and between the dates indicated on my International Travel Request Form. I understand that I am not required to participate in the Program. My participation is wholly voluntary. In consideration of the University's agreement to permit me to participate in the Program, I understand and agree to the following conditions of my participation by signing the International Travel Request Form

- I understand that the country/countries I will travel to must meet the following criteria at the time of my travel request/application:
  - Department of State Country-Specific Advisory Level 3 or lower (Travel to countries with Advisory Level 1 and 2 is allowed. Travel to countries with Advisory Level 3 is allowed providing vaccine is available and being administered in those countries. Travel to countries with an Advisory Level 4 is not allowed.)
  - Borders open to students
  - Visa available if required for entry
  - US Embassy is open
  - Insurers will cover travel to selected country
- I agree to cancel the trip if the Advisory Level for the travel destination is Level-4 at the time of travel, I have not been able to receive the Covid vaccine by the trip date, or I am not able to quarantine upon my return from overseas due to my obligations related to school and/or work, or the University decides to cancel the trip.
- I agree to receive Covid vaccine before the trip date.
- I agree to quarantine for 10 days upon my return from the international trip
- I understand that international travel creates heightened risks relating to my health and safety. Specifically, I understand that as a participant in international travel, I am accepting the risk that I may suffer injury, illness, or death resulting from travel, activities relating to travel, or activities conducted while I am traveling. Further, I understand that as an international traveler, I have been advised to consult available information provided by relevant governmental agencies, including the Centers for Disease Control, the United States State Department, and other entities relating to specific warnings and advisories impacting my proposed destination or countries in my travel itinerary.
- I have been offered the opportunity to consult with Rowan University professionals in the International Center as well as in the Wellness Center relating to international travel and understand that there are special health and safety risks relating to international travel. I may be exposed to illnesses or danger while traveling and I may be forced to seek medical care while traveling internationally or may risk a period of quarantine upon return from such travel in the case of certain illnesses. In addition, I understand that if I elect to cancel travel plans outside of applicable cancellation time-frames, I may lose deposits, suffer assessments of fess for travel cancellations or changes, or incur other personal financial loss relating to same. As such, I have been advised to and understand that I should review such cancellation periods and make

informed decisions relating to change in travel plans and itineraries resulting from risks existing in other countries.

- I represent and warrant that I will be covered throughout the Program and throughout my absence from the United States by a policy of comprehensive health and accident insurance which provides coverage for illnesses or injuries I may sustain or experience while abroad; and specifically in the countries where I will be living and traveling. By initialing the Section-3 of the International Travel Request Form, I certify that I have confirmed that my health insurance policy will adequately cover me while I am outside of the United States; and, I hereby release and discharge the University from all responsibility and liability for any injuries (including death), illnesses, medical bills, claims, damages, bills, charges or similar expenses I incur while I am abroad.
- I further represent and warrant that I have no condition, physical or mental, which requires special medical attention or accommodation during my participation in the Program.
- I agree that prior to my departure I will become familiar with the health and safety issues of traveling abroad in general and in particular of traveling in the countries where I will travel and study. To this end, I have or will review the information on the website of the Overseas Security Advisory Council (a part of the U.S. Department of State), which compiles and disseminates information about safety in foreign countries, at http://www.osac.gov, the website of the US State Department, which offers Travel Advisory for international destinations, at https://travel.state.gov/content/travel/en/international-travel.html, the website of the Center for Disease Control, which disseminates Travel Notices for international destinations, at https://wwwnc.cdc.gov/travel and the websites of other higher education associations, which have developed sets of "good practices" designed to provide practical guidance on health and safety issues associated with overseas studies, such as http://www.studentsabroad.com. Further, I understand and hereby acknowledge that I have reviewed the Centers for Disease Control information (http://www.cdc.gov/), on the areas where I will travel; that I am aware of and understand the risks and dangers of such travel, including but not limited to the dangers to my own health and personal safety posed by the use of public transportation, civil unrest, political instability, terrorism, crime, violence, epidemic, pandemic, and disease including insect borne diseases. 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 or countries in which travel occurs.
- I understand and agree that the University reserves the right to make changes to the Program itinerary at any time and for any reason, with or without notice, and the University shall not be liable for any loss whatsoever to me by reason of any such cancellation or change. The University is not responsible for penalties assessed by air carriers that may result due to operational and/or itinerary changes, regardless of whether the University makes a flight arrangement. Any additional expense resulting from the above will be paid by me. The University or its representative(s), agent(s) or employee(s) reserves the right to substitute hotels or accommodations or housing at any time. Specific room and housing assignments are within the sole discretion of the University.
- I understand and agree that the University assumes no responsibility or liability, in whole or in part, for any delays, delayed or changed departure or arrival times, fare changes, dishonors of hotel, airline or vehicle rental reservations, missed carrier connections, sickness, disease,

injuries (including death), losses, damages, weather, strikes, acts of God, circumstances beyond the control of the University, force majeure, war, quarantine, civil unrest, public health risks, criminal activity, terrorism, expense, accidents, injuries, damage to property, bankruptcies of airlines or other service providers, inconveniences, cessation of operations, mechanical defects, failure or negligence of any nature howsoever caused in connection with any accommodations, restaurant, transportation, or other service or for any substitution of hotels or of common carriers beyond the University's control, with or without notice, or for any additional expense occasioned by any of the foregoing. If due to weather, flight schedules, or other uncontrollable factors, I am required to spend additional nights, the University will not be responsible for my hotel, transfers, meal costs, or other expenses. My baggage and personal property are transported at my risk entirely.

- I understand and agree that the University 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 the University, I understand that I may be required to leave the Program in the sole discretion of the University's representative(s), agent(s) or employee(s), and I may be referred to the appropriate University officials for further disciplinary or other action, In such an event, no refund will be made for any unused portion of the Program.
- I understand and agree that the University reserves the right, in its sole discretion, and for any reason, to cancel the Program or any aspect thereof prior to departure; and, it is in the University's sole discretion to cancel the Program or any aspect thereof after departure, requiring that all participants return to the United States if the University, its representative or employee(s) determines or believes that any person is or will be in danger if the Program or any aspect thereof is continued.
- I, individually, and on behalf of my heirs, successors, assigns, and personal representatives, hereby release and forever discharge the University 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, including but not limited to any claims, demands, actions, causes of action, judgments, damages, expenses, and costs, including attorney's fees, which 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.
- I, individually, and on behalf of my heirs, successors, assigns, and personal representatives, hereby agree to indemnify, defend, and hold harmless the University and its employees, agents, officers, trustees, and representatives (in their official and individual capacities) from any and all liability, loss, damage, or expense, including attorney's fees, which arise out of, occur during, or are in any way connected with my participation in the Program or any travel incident thereto.
- I agree that this Waiver, Release and Indemnification Agreement is to be construed under the laws of the State of New Jersey, U.S.A.; and that if any portion hereof is held invalid, the balance hereof shall, notwithstanding, continue in full legal force and effect.

  If I decide to travel to location indicated on my International Travel Request Form, I will
  - Visit the Department of State website for Travel to High-Risk Areas.

- Stay alert in locations frequented by Westerners, particularly at popular tourist locations.
- Avoid demonstrations and crowds.
- Stay at hotels with identifiable security measures.
- Monitor local media and adjust your plans based on new information.
- Enroll in the Smart Traveler Enrollment Program (STEP) to receive Alerts and make it easier to locate you in an emergency.
- Follow the Department of State on Facebook and Twitter.
- Review the Crime and Safety Report for my travel destination
- Have a contingency plan for emergency situations. I will review the Traveler's Checklist.

I understand that this international travel acknowledgment is intended to enhance my understanding of the special risks relating to international travel and that this document is a supplement to the existing Travel Waiver required as part of my travel application. If I have questions relating to this waiver, I may contact the Office of General Counsel. If I have questions relating to international travel, I may contact the International Center for Student Travel, the Provost's Office for Faculty Travel, or the Wellness Center for health-related concerns and further guidance on special health related issues in the context of international travel.

By signing the International Travel Request Form, I acknowledge that I have read this entire document, that I understand its terms, that by signing the International Travel Request Form, I am giving up substantial legal rights I might otherwise have, and that I am at least 18 years of age and competent to sign the Travel Request Form and have signed it knowingly and voluntarily.