COVID-19 Off Campus Experience Protocol and Release, Assumption of Risk and Indemnification

. ALL participants

ST read and sign the Release prior to beginning off campus experiences.

Name:				
	Last	First	Middle	
Address:				No.
	Street	City	State	Zip

COVID-19 Protocol:

I understand that the health and safety of students is a top priority of the University. Therefore, I acknowledge and understand the following procedures and protocol will be in effect for off campus experiences. I also acknowledge that guidelines related to COVID-19 may change at any point and these protocols may be revised as needed.

1. To prevent the spread of COVID-19, students will be encouraged to complete virtual/remote experiences.

2.