



Off-Campus Activity
Internship, Community Engagement, and Experiential Learning
Spring 2021

Student Name: _____ **Student ID:** _____

Activity: _____ **Activity Dates:** _____

Activity Location: _____

Due to the uncertainty caused by the COVID-19 pandemic and the potential risks involved with any type of internship, experiential learning or other activity involving community engagement, students should thoughtfully consider whether participation in this activity is in their best interest, both personally and academically. Even with the public health and other health and safety measures implemented by TCU and/or by each clinical, practicum or internship site or placement to prevent the spread of COVID-19, TCU cannot promise or ensure that a student will not be exposed to or contract COVID-19. Each TCU student is responsible for his or her own health and well-being, and must evaluate the risks of participating in a an off-campus activity in light of that student's health history, underlying health conditions, advice from healthcare providers, the availability or accessibility of healthcare facilities and providers when travelling, and other factors that may impact the risks of contracting the COVID-19 virus.

Just like all TCU students, those who choose to participate in a clinical placement, internship, field placement, or similar community engagement or experiential learning opportunity in the 2020-21 academic year should have health insurance. Students are also responsible to obtain, review, and ensure they are comfortable with the health and safety protocols of the employer or internship site or location prior to participating in the activity at the activity location. Students are encouraged to use guidelines suggested by the CDC and local health authorities in their assessment.

This form is in addition to, and not a substitute for, the Affirmation and Acknowledgement of Risk form required of all students participating in off-campus activities.

Please select one of the following statements and return this form to your course faculty:

I do not choose to participate in the activity identified above. I will immediately consult with my academic advisor to understand alternatives and how this might impact my academic progress or plan.

Yes, I will participate in practicum, internship, and/or field or clinical placement as scheduled in the winter intercession/spring 21 semester, and I represent that I have current health insurance coverage and will maintain that coverage while I am a student at TCU. By signing below and choosing to participate in the identified activity, I acknowledge that TCU cannot eliminate the risks to me of contracting the COVID-19 virus or any harm to my life and health that may be caused by the virus. By signing below, I also represent that I have considered and evaluated the risks associated with living and learning in a campus environment and/or participating in the identified activity in light of my health history, underlying health conditions, advice from my healthcare providers, and other factors that may impact the risks to me of contracting the COVID-19 virus. By choosing to participate in this activity, I represent that I have decided to assume those risks. Finally, by choosing to participate in the identified activity and signing below, I agree that on behalf of myself, my executor, heirs, and assigns, I release and hold harmless Texas Christian University and its trustees, officers, employees, agents, and successors of and from any and all expenses, damages, judgments, and costs, of whatever kind, that arise from any illness or injury I may acquire or sustain while participating in the practicum, internship, and/or field or clinical placement.

Student Signature

Date

Course Faculty/Program Director

Date