

Addendum To The Conditions of Participation:
Travel Warnings Related To the Covid-19
Pandemic & Other Health and Safety Risks
[Summer & Short-Term Programs]



SECTION I – TO BE COMPLETED BY STUDENT

Name of Student: _____ (“Student”)

This Addendum to the Conditions of Participation form for Syracuse University study abroad programs is executed on (*month/day/year*): ____/____/____ by the undersigned with respect to study at _____ (“the Program”) in _____ (*City, Country* “Program Location”) for the period beginning (*month/day/year*): ____/____/____ and ending (*month/day/year*): ____/____/____ (“Program Duration”).

SECTION II – STUDENT & PARENT/GUARDIAN: READ AND SIGN

The undersigned hereby acknowledge that I/we have executed a Syracuse University Conditions of Participation form for the study abroad Program, which is hereby incorporated by reference into this Addendum.

Attending a study abroad program during the Short-Term or Summer semester will require adaptations to program operations and student behavior. While the Program will make every effort to offer a robust study abroad experience, Syracuse University cannot guarantee that conditions on the ground will not change during the Program and that in-person experiences may be curtailed due to an unforeseen outbreak of Covid-19 infections. Further, in response to local conditions, health authorities will have the authority and may mandate isolation or quarantine consistent with local regulations. Program components that involve travel (field trips and signature seminars) may be altered or canceled based on local conditions. Finally, participating students may be subject to additional local precautionary safety measures, including those issues depending on the type of Covid-19 vaccination or approved exemption.

Accordingly, participation in the Program acknowledges that I/we recognize that attendance at the Program also acknowledges that I/we agree to follow all Covid-19 related protocols and accept the associated risks. I/We acknowledge that I/we are subject to and will abide by those regulations. I/We further acknowledge that we have made the decision for the Student to voluntarily travel to the Program Location in connection with the above-referenced Program.

Finally, I/we acknowledge that Syracuse University will not refund program fees or personal expenses in the event of program interruption or in situations where certain elements of the Program cannot be delivered, and the quality of experience is impacted due to Covid-19.

I/We hereby agree to assume all risks relating to travel to and study in the Program Location, and release and forever discharge Syracuse University, its Trustees, officers, employees, agents and assigns of and from any and all loss and liability in connection with any injury, accident, damage, claims, costs, expenses or other loss caused, suffered or incurred by or to the Student, arising out of or in any way associated directly or indirectly with the Student’s participation in the Program.

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SECTION II (CONTINUED)

It is in the best interest of each Student to continually monitor this guidance both before and throughout their time abroad, particularly maintaining awareness of Covid-19 vaccination requirements of Program Location, exemption provisions, and the associated risk. I/We acknowledge that I/we am/are participating with the full awareness and through review of US State Department and Centers for Disease Control (CDC) guidance for the Program Location. I/We acknowledge that I/we have been advised to review and monitor the United States Department of State website (<http://travel.state.gov>) and the CDC website (<https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>) for any additional warnings, advisories, information, updates and any additional information regarding Covid-19 and my/our Program Location. I/We also acknowledge that I/we have been advised to refer to International SOS website (<http://internationalsos.com>, SU access number 11BCPA000177) for updates, additional warnings and emergency protocols and services.

Signature Requirement: *Only physical signatures accepted. Digital signatures are not permitted. Parent/Guardian signature only required if the Student is under age 21 or parent/guardian is responsible for the Student's tuition and fees.*

Signature of Student: _____

Date: _____

Signature of Parent/Guardian: _____

Date: _____