



**OSPGD OFF-CAMPUS INTERNSHIP AGREEMENT
AND GENERAL RELEASE**

This is a release. Please read carefully.

I, _____, ID # _____
(Student's First and Last Name) (F&M ID #)

plan to pursue an internship, research or other experience during _____
(Year)

with: _____
(Internship Site), (City/State/Country)

ACKNOWLEDGEMENT AND ASSUMPTION OF RISK

I acknowledge that I am voluntarily participating in the above-referenced internship for my own educational purposes and career development. Any work I will perform relating to this experience will not be as an employee of Franklin & Marshall College. While it is possible that I may be an employee of the College in a work study, College Work Award program or some other capacity, I understand that the work I will be performing in this internship is not on behalf of the College.

I understand that the College assumes no liability for any property damages, personal injuries, or any other type of loss which I may suffer or incur during the course of preparing for, traveling to and from, and participating in the internship. As provided further below, I agree to release the College and hold it harmless from any and all injuries or losses arising from my participation in this experience, including those related to COVID-19 described herein.

I understand and acknowledge that the novel coronavirus, COVID-19 was declared by the World Health Organization and U.S. Centers for Disease Control to be a global pandemic. I acknowledge the contagious nature of COVID-19, the fact that it can be difficult to identify in another, and the inherent risks of exposure to those who may be infected with COVID-19 at my internship. I voluntarily assume the risk that I may be exposed to or infected by COVID-19 or any other virus, bacterial infection, infectious disease or other malady by participating in the internship and that such exposure or infection may result in personal injury, illness, permanent disability, and/or even death.

I understand and acknowledge that given the unknown nature of COVID-19, it is not possible to fully list each and every individual risk of contracting COVID-19 or any related condition. I acknowledge that I have asked for and/or been given any information that I may need to determine the risks associated with participating in the internship and to make an informed assumption of those risks.

I understand that the College reserves the right to make cancellations, changes or substitutions in cases of emergency or changed conditions, or in the general interest of the College. The College may delay, cancel or change my internship in whole or in part because of circumstances beyond the College's reasonable control or which it could not have reasonably anticipated, avoided or overcome, including but not limited to acts of terrorism; plague, epidemic, pandemic, outbreaks of infectious disease or any other public health crisis, including quarantine or other employee restrictions; act of authority whether lawful or unlawful, compliance with any law or governmental order, rule, regulation or direction, curfew restriction, expropriation, compulsory acquisition; or natural disaster.

I hereby acknowledge and represent that I have sufficient health, accident, disability and hospitalization insurance to cover me for any accidents or other healthcare needs that may arise during my internship. I understand that if I use my personal vehicle with respect to the internship, the College has no liability for injury or property damage which may result from that use and agree to rely solely on my personal vehicle insurance coverage. I further understand that I am responsible for the costs of the above-referenced Insurance and expenses not covered by this insurance, and recognize that the College does not have an obligation to provide me with such insurance, or cover any portion of related expenses that I may incur outside of any insurance coverage.

PERSONAL CONDUCT

I understand that the responsibilities and circumstances of an off-campus internship, research or other experience may require a standard of professional decorum, and I agree to conform to the standards established for the internship. I further understand that it is important to the success of the present internship and the continuance of future internships for other students, that participants observe appropriate standards of conduct. I understand that the College, through agents and representatives of the Office of Student and Post-Graduate Development, has the right to take whatever steps it deems appropriate, in its sole discretion, to ensure that these expectations are met, including but not limited to withdrawing the grant award and/or discontinuing my continued participation in the internship.

GENERAL WAIVER & RELEASE

I agree that my participation in the internship, including but not limited to the use of any and all related facilities, shall be undertaken by me at my own and sole risk and that the College shall not be liable for any and all claims, demands, injuries, damages, actions, or causes of actions, whatsoever resulting from any injury or damages to me or to my property arising out of or connected with the internship and/or with the use of any and all services, or facilities associated with it.

I do hereby expressly release the College, its trustees, officers, employees, faculty, professional staff and agents (hereinafter the "Releasees") from any and all present or future claims resulting from my participation in this internship including, but not limited to, claims arising or allegedly arising from loss, damage or theft of personal property, personal injury or death arising as a result of the my participation in the internship and/or engaging in any activities in any way incidental thereto, whenever, wherever and however the same may occur, and freely and fully assume all risks, hazards and losses which may befall me in connection with my participation in the internship and/or engaging in any activities in any way incidental thereto, whenever, wherever and however the same may occur.

I further agree to indemnify and hold harmless the College, its trustees, officers, employees, faculty, professional staff and agents for any claims arising as a result of or in connection with my participation in the internship and/or engaging in any activities in any way incidental thereto, whenever, wherever and however the same may occur. I understand that this waiver, release of liability and indemnification is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Pennsylvania, and I agree that if any portion is held invalid, the remainder of the waiver and release will continue in full legal force and effect. I specifically recognize that this waiver, release and indemnification pertains to, but is not limited to, negligent conduct by the Releasees.

STUDENT SIGNATURE: _____

Date: _____