

**GENERAL AGREEMENT AND RELEASE FORM**  
**(Students)**

**Please read and sign in the presence of a notary. Your program participation will not be finalized until student AND parent/guardian copies are returned (within 2 weeks of CAS approval) to the Office of Off-Campus Study & Exchanges.**

**\*\* This Agreement constitutes the entire agreement between the parties and is not subject to changes or supplements. \*\***

1. The undersigned, (hereinafter "I"), an applicant for the Skidmore Off-Campus Study Program (hereinafter "the Program") offered by Skidmore College (hereinafter "Skidmore") hereby waives and releases Skidmore, its agents and employees from and against all claims or causes of action which I may have, now or in the future, relating to any injury, loss, damage, accident, delay or expense resulting from participation in the Program, including, without limiting the generality of the foregoing, the use of any vehicle, the occurrence of strikes, war, governmental restrictions or regulations, or the acts or omissions of any water carrier, airline, railroad, bus company, taxi service, hotel, restaurant, school, university, or any other firm, agency, company or individual. I hereby agree to exonerate, indemnify and hold Skidmore, its agents and employees harmless from and against any and all obligations or liabilities for which I may become liable as the result of damage or injury to the person or property of others while participating in the Program. I expressly acknowledge and agree that Skidmore, its agents and employees shall not be responsible for any injury or loss whatsoever suffered by me during periods of independent travel (which I understand are unsupervised) or during any absence from activities supervised by Skidmore.
2. During my participation in the Program, I hereby grant Skidmore, its employees and agents full authority to take whatever actions they may consider to be warranted under the circumstances regarding the protection of my health and safety, and I hereby release each of them from any liability for any such decisions or actions as may be taken by them in connection therewith. The authority granted in the preceding sentence shall include the right to place me, at my own expense, and without further consent, in a hospital, within or outside the United States, for medical services and treatment, or if no hospital is readily accessible, to place me in the hands of a local medical doctor for treatment. If it is deemed necessary or desirable by Skidmore, its employees or agents, I authorize them to transport me back to the United States, by commercial airline or otherwise, at my own expense, for medical treatment.
3. In the event that Skidmore, its employees or agents shall advance or loan any monies to me or shall incur expenses on my behalf, while I am a participant in the Program, I hereby agree to repay any such advances, loans or expenses immediately upon my return to the United States. If said expenses are not paid within thirty days of my return, I authorize Skidmore to charge said expenses to my Skidmore student account.
4. I hereby agree to comply with all rules, standards and instructions relating to student behavior which are promulgated by Skidmore or the host college/institution. I agree that Skidmore, its employees and agents shall have the right to enforce appropriate standards of conduct, and that Skidmore may, at any time, terminate my participation in the Program in the event of any failure to abide by any such standard of conduct. If my participation in the Program is so terminated, I agree to return to the United States immediately thereafter, at my own expense.
5. I hereby acknowledge that I will be charged, and will be required to pay, the Skidmore comprehensive fee(s) for my semester or year off-campus. This fee is equal to Skidmore tuition, room at on campus apartment rate, and full board, as applicable. This fee covers program tuition and mandatory academic fees, room and board (as applicable), medical insurance, and any other mandatory program fees. I understand that my program provider's mandatory course enrollment and maximum credit load for the semester may differ from Skidmore's 15 semester credit requirement. Should I opt to add an additional credit-bearing course(s) that is not included in my provider's mandatory courseload, I understand that I will be responsible for paying any supplemental fees for said course(s) directly to the provider. I further acknowledge that should I choose to enroll in courses during my off-campus program that have not been approved for academic credit and therefore are not transferable to Skidmore, I will be responsible for payment of said course fees. Skidmore College will handle payments to the program provider, on my behalf, for the aforementioned fees. I recognize that Skidmore's comprehensive fee will differ from the fees of program providers.
6. I understand that I am required to use program arranged room and board where available. Additionally, if provided a housing option, I am required to select a homestay. If I desire an alternative to program housing or a homestay I must consult with an OCSE Program Manager. I understand that the invoice which I receive from Skidmore will be for the homestay option, when available, and the applicable board charges. I am responsible for airfare to/from the program site, books, and personal expenses (including passport and visa charges). If my program does not include room and/or board, or includes partial board, my comprehensive fee will be adjusted accordingly. I understand that certain programs provide housing assignments once students arrive on site (for example Australia & UK programs, independently approved programs, etc.). These housing assignments may or may not include a board plan. Therefore for these programs, Skidmore is unable to bill me a board charge in advance. If that is the case, I will be responsible for paying board directly to the program provider once I arrive on site. I will address any inquiries regarding said programs to the Finance Manager in OCSE.
7. I will pay my program confirmation deposit directly to Skidmore College within two weeks of approval to study off-campus by the Committee on Academic Standing (Skidmore College) regardless of provider acceptance status and in accordance to Skidmore's deposit policy it will be applied to my SKIDMORE COLLEGE account. I will note on my acceptance form to the program provider that the program confirmation deposit was paid to Skidmore College directly. Any additional deposits (ie. housing deposit to cover

room damage, library fines, misc. charges, etc.) and/or upgrades are my responsibility and I agree to pay the provider directly. If I were to withdraw from this program for whatever reason, I understand that I will incur a withdrawal fee of minimally \$500. In addition, I will be financially responsible for all unrecoverable fees associated with my withdrawal. These fees will be billed under the College's refund (semester charges liability) policy utilizing the program provider's calendar.

8. When participating in group tours or other activities arranged by Skidmore or the program provider, I agree to accept the will of the majority whenever a matter of choice is presented to the group. I will also accept in good faith the instructions and suggestions of Skidmore or their agents in all matters relating to the Program including the personal conduct of Program participants. I understand that, from time to time, Skidmore publicity materials may include statements by and/or photographs of Program participants and I hereby consent to such use of my comments and photographic likeness.
9. I hereby acknowledge the Skidmore and/or the program provider reserves the right in their sole discretion to make cancellations, substitutions or changes in the Program when they consider such cancellations, substitutions or changes to be necessary.
10. I also understand that neither Skidmore nor the provider can guarantee that courses which I select prior to onsite registration at my program location will be available. My acceptance of an offer to off-campus acknowledges that I have thoroughly researched and understand how my participation will affect my academic standing should I fail to register for the course selections I have proposed. I further understand that it is my responsibility to work with the Registrar, my advisor and the chair of the department for final approval. Furthermore, I acknowledge I will need to earn a "C" or better to have credit for a course transferred back to Skidmore. In addition, I understand that Skidmore's fees are based upon costs currently in force and are subject to change.
11. I hereby acknowledge that OCSE reserves the right to withdraw me from my intended program should I fail to meet the predetermined conditions (i.e.; GPA, good social and financial standing) required to study off-campus. I also acknowledge that OCSE reserves the right to withdraw me for neglecting to complete the mandated OCSE documentation and submit the requisite program confirmation deposit. I understand that if I am administratively withdrawn from my intended program, I will incur a withdrawal fee of minimally \$500.
12. All references in the Agreement and Release to Skidmore and its employees or agents shall include the officers, directors, staff members, campus directors, chaperones, group leaders, employees, agents, and affiliates of Skidmore, as the case may be.
13. I hereby acknowledge that I have read the terms of conditions set forth in this Agreement and Release and the Skidmore Off-Campus Study Programs written materials and I understand that this Agreement and the materials constitute the entire agreement between Skidmore and myself.
14. This Agreement shall be construed in accordance with the laws of the State of New York. I agree that all claims and disputes arising out of or relating to this General Agreement and Release Form shall be subject to the jurisdiction of the New York State Supreme Court only and Saratoga County is designated as the proper venue therefore.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Name of Applicant (Please Print)

STATE OF \_\_\_\_\_ )  
 )ss.:  
COUNTY OF \_\_\_\_\_ )

On the \_\_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_\_\_ before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

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Notary Public