

Informed Consent and Release of Liability

For Travel Abroad to a Country/Area under a U.S. Department of State Level 3 or Level 4 Travel Advisory or Center for Disease Control and Prevention Travel Health Notice

The undersigned acknowledge having been informed that there are risks involved in travel to _____ .
The undersigned acknowledge having read and understood the U.S. Department of State Travel Advisory dated _____ regarding travel to _____ and within _____. Despite the Travel Advisory and the University of Nebraska's recommendation to avoid studying in _____, the undersigned wish to proceed to the Country or Area despite the U.S. Department of State categorizing it as a Level 3 or Level 4 country/area.

The undersigned are aware that travelers to, within, and from the Country/Area may be subject to risks including, but not limited to, terrorism, war, disease, injury, death, property damage and/or other unforeseeable dangers. The undersigned voluntarily assume all risks and release the State of Nebraska, the Board of Regents of the University of Nebraska, and all its officers, agents, and employees from any and all claims, demands, and causes of actions, and from liability of any kind or nature whatsoever, including but not limited to bodily injury, death, and property damage, rising out of or relating to participation in this study abroad program. The undersigned understand that this release includes all transportation to and from the program, whether activities are directly related to the program or not.

Further, the undersigned understand that academic credit or financial refunds may not be received if a traveler to a Level 3 or Level 4 Country/Area must leave the study abroad program early due to security concerns.

The undersigned have read and signed this document with full knowledge of its significance. If the traveler is not 19 years of age, the signature of the traveler's parent or legal guardian indicates full agreement with and acceptance of the terms of this release. If the traveler is 19 years of age and married, the signature of the traveler's spouse indicates full agreement with and acceptance of the terms of this release.

Traveler Signature

Date

Printed Name of Traveler

Signature of Parent/Legal
Guardian or Spouse

Date