



Internship Waiver and Assumption of Risk

Student Name

UID

Internship Location

Supervisor

Course Level

Semester

Please read and sign this form and return it to the appropriate department/faculty/staff member prior to the start of the internship.

Wright State University believes that internships can be an important part of the student experience. Internships do, however, involve significant risks, both to students participating in them and also to the University based upon the manner in which students conduct themselves while participating in internship opportunities.

By signing the form, the above-named student agrees as follows:

1. To observe standards of conduct set forth in the Wright State University Code of Student Conduct and all University policies and procedures applicable while participating in the internship activity referenced above, understanding that such compliance is important to the success of the internship and to the University's willingness to permit future internship activities.
2. That he or she will not act as an agent or representative of Wright State University and, accordingly, shall not have or hold himself or herself out as having the power or authority to bind or create liability for the University by virtue of his or her negligent or intentional acts or omissions.
3. To obtain and maintain such health, accident, disability, hospitalization and travel insurance as he or she may deem necessary during the internship, and to be responsible for the costs of such insurance and for any expenses not covered by insurance.
4. To immediately disclose to the University any physical or emotional conditions or problems that might impair his or her ability to complete the internship, and that he or she hereby releases the University and its trustees, officers, employees, agents and representatives from any and all claims, demands, injuries, damages, losses, actions, causes of action, or expenses whatsoever arising out of his or her failure to disclose such conditions or problems.
5. That participation in the internship is entirely voluntary, and that he or she is fully aware, having sought and obtained such information and advice as he or she feels are necessary and appropriate, that such participation involves risk of injury and property damage, including possibly short-term and long-term disability and even death. These risks can come from causes which are many and varied, may not be foreseeable, and may include negligent or intentional acts or omissions of others. He or she assumes responsibility for any injury, loss, or damage resulting directly or indirectly from participation in the internship and releases the University and its trustees, officers, employees, agents and representatives from any and all claims he or she may have in the future, waives all such claims, and agrees not to sue these parties for any such claims arising out of his or her participation in the internship, including but not limited to claims arising out of the negligent or intentional acts or omissions of others.

Signature _____ **Date** _____