**Acknowledgement of Risks and Release of Responsability**

Secretary of International Relations

Universidad Tecnológica Nacional, Buenos Aires, Argentina

Student’s Name:

Passport Number:

Home University:

Regional UTN School:

Dates of Program:

The Universidad Tecnológica Nacional, through its Secretary of International Relations, offers students from many different educational institutions the opportunity to enroll through international study programs as non-degree seeking students and participate in its activities. Certain potential risks to personal health and safety are associated with international travel and residence in a foreign country. You should not participate in a study abroad program unless you are willing to accept the associated risks.

The UNIVERSIDAD TECNOLÓGICA NACIONAL cannot guarantee the health and safety of participants in a study abroad program or eliminate all risks from study abroad environments.

Please read, complete and sign this form before your term of study begins. Students who fail to sign and return this form will not be allowed to participate in any university program.

I understand that there are certain risks associated with international travel and residence in a foreign country and that the UNIVERSIDAD TECNOLÓGICA NACIONAL through its Secretary of International Relations and its staff cannot control these risks.

I understand that these risks may include exposure to potentially serious health and safety hazards such as:

* transportation accidents; storms, floods, earthquakes, and other natural disasters; infectious diseases,
* inadequate medical care, remote access to medical treatment; armed insurrections; and terrorist activities.

I understand that the UNIVERSIDAD TECNOLÓGICA NACIONAL is not in a position to guarantee my

personal health or safety during my participation in an exchange or study abroad program.

I understand that the UNIVERSIDAD TECNOLÓGICA NACIONAL cannot monitor or control all of the daily personal decisions, choices, and activities of individual participants.

I understand that the UNIVERSIDAD TECNOLÓGICA NACIONAL cannot assure that foreign standards of due process apply in Argentine legal proceedings or provide or pay for legal representation for participants.

I understand that the UNIVERSIDAD TECNOLÓGICA NACIONAL may not assume responsibility for the actions of persons not employed or otherwise engaged by the university, for events that are not part of the program, or that are beyond the control of the sponsor and its subcontractors, or for situations that may arise due to the failure of a participant to disclose pertinent information.

I understand and hereby acknowledge that I assume all risks incurred by my participation in an exchange or study abroad program.

In consideration of being allowed to enroll and participate in the UNIVERSIDAD TECNOLÓGICA NACIONAL, through its Secretary of International Relations, the undersigned hereby releases the UNIVERSIDAD TECNOLÓGICA NACIONAL, its Board of Trustees, officers, agents and employees from any and all claims arising out of or in any way connected with the exchange program and the undersigned’s participation in the program, including, but not limited to the risks as outlined above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s signature Date

**Parental consent (Required if student is less than 21 years of age on the date this document is signed).**

The undersigned parent or legal guardian of the above-named student, a minor, hereby consents to the participation of said student in the study abroad program, subject to the warnings stated above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s signature Date