

John Marshall Law School Micronesia Externship Program

Agreement for Participation in 2012

I, (print name) _____, a participant in the Micronesia Externship Program (hereinafter "Program"), hereby agree as follows:

1. I have read and understand the program requirements as set forth in the Micronesia Externship Program Field Placement Handbook.

2. I will comply with the John Marshall Law School Code of Student Responsibility throughout the duration of my participation in the Program. I agree that the Program Director shall have the right to enforce appropriate standards of behavior and that I may be dismissed from the Program at any time for failure to comply with such standards. I understand that if I am dismissed from the Program, I shall receive a grade of "no credit" for the externship.

3. I understand that as an extern I hold a position of trust and am bound by the standards of attorney conduct for the jurisdiction where the placement site is located ("the host jurisdiction"). I further understand that if my placement site is a government office I am bound by the ethical standards for government employees, including all policies relating to gifts and conflicts of interest, and if my placement site is a judicial clerkship, I am bound by the ethical standards of the judiciary. I understand that a violation of the standards of attorney conduct is a violation of the Law School's Code of Student Responsibility and is grounds for dismissal from the Program pursuant to paragraph 2.

4. I understand that I am subject to the laws of the host jurisdiction. I agree to comply with those laws and will not engage in any activity which is illegal under those laws. I understand that possession of any illegal drug, as defined by the laws of the host jurisdiction, is grounds for immediate expulsion from the Program. In addition, I understand that should I have any legal problems in the host jurisdiction, I will be responsible for any legal costs incurred as a result. The Law School cannot provide legal counsel in such circumstances.

5. I understand that I am required to work at the externship site 47 hours for each credit hour for which I register. I understand that if the placement site terminates my externship for cause (i.e., for reasons for which I could be terminated from their employment), that my participation in the Program will terminate immediately, and I will receive a grade of "no credit" for the externship.

6. If I decide to operate a motor vehicle while participating in the Program, I recognize that the Law School or its agents or employees assume no responsibility for my safety or for costs or difficulties that I may incur, and that I participate in these activities at my own risk. I understand that I am responsible for all costs related to operating the vehicle, including insurance and the incurrence of any liability due to traffic infractions or accidents.

7. I understand and acknowledge that there are inherent health risks associated with traveling. I agree that I am personally responsible for obtaining all health information, instruction, medical procedures, immunizations and medications appropriate to my intended travel. I recognize that the Law School is not responsible for any of my medical or medication needs, and I assume all risk and responsibility therefore. I further agree that if I become incapacitated, the Law School, through its agents and employees, may take whatever action is deemed necessary with respect to my health and safety. I authorize the Law School, its agents and employees to place me, at their discretion and without my further consent, in a hospital or in the care of a local doctor for medical services and treatment. If necessary or desirable, I also authorize the Law School, its agents and employees, to transport me back to the United States by commercial airline or otherwise for medical treatment. I agree that I will be fully responsible for any and all expenses, including transportation costs, associated with or in any way related to my medical care.

8. I understand that local medicine may be an option for medical care. I understand that if I accept local medicine, I do so at my own risk. The Law School or its agents or employees assume no responsibility for my safety or any liability for costs or difficulties that I may incur, and that I participate in these treatments at my own risk.

9. I understand that I will be traveling to a location which may not have the same quality or level of healthcare as the US and where prescription medication may not be available. I understand that the Law School recommends that if my doctor has prescribed medication for me that I bring with me a sufficient quantity of the prescribed medication to last for the duration of my externship. I understand that it is my responsibility to determine whether I need permission to carry over-the-counter or prescription medications into or through any country. I understand that all medication should be carried in its original container.

10. I understand that the Law School strongly recommends that I visit the Center for Disease Control's website at www.cdc.gov to receive additional, country-specific health and travel information.

11. I understand that if I engage in recreational activities, sports, tours, travel, or any other activities during free time, the Law School or its agents or employees assume no responsibility for my safety or any liability for costs or difficulties that I may incur. I understand that I participate in these activities at my own risk.

12. I understand that there are inherent risks related to some common recreational activities such as snorkeling, scuba diving, and other water sports. I understand that the Law School recommends that if I participate in these activities, I participate in these activities only with licensed operators which are PADI certified. I understand that if I engage in these activities, the Law School or its agents or employees assume no responsibility for my safety or any liability for costs or difficulties that I may incur. I understand that I participate in these activities at my own risk.

13. I understand that there are other risks that may not be foreseeable. Furthermore, I acknowledge that I have read the Consular Information Sheet for the country or countries visited on this externship program issued by the United States Department of State. I understand that I may obtain the most current Consular Information Sheet at the following website: <http://www.travel.state.gov/>. I hereby assume any and all such risks.

14. I understand that if my participation in the Program is terminated by the Program Director, I will be dismissed with no refund of fees. If I am dismissed before completion of the Program, I agree that I will be responsible for any and all costs and expenses associated with my return home, and that I will also be responsible for my own travel arrangements home. I also understand that if I leave the Program voluntarily for any reason, including illness, I will be responsible for any and all costs and expenses associated with my return home and that there will be no refund of any fees.

15. I understand that if I am invited to an alcohol-related cultural event (i.e., wine tasting, etc.) during the externship, that this event is not compulsory, and that I will be solely responsible for any injuries or property damage arising in relation to my participation in the event.

16. I understand that in order to participate in the Program, I must have a passport which is valid for at least six months from my date of departure and that I am responsible for obtaining a valid passport and any necessary visas or entry documents for the host jurisdiction.

17. I understand that the financial policies of the Law School apply to the Micronesian Externship Program and that if I withdraw from the Program prior to completion, my refund, if any, will be determined by the Law School's refund policy.

18. I agree that should any provision or aspect of this agreement be found to be unenforceable all remaining provisions of this agreement will remain in full force and effect.

19. This agreement is not subject to oral modification.

20. I certify that my agreement to the provisions herein is wholly voluntary.

21. I certify that I am at least 18 years of age.

Signature of Student

Date

Print Name