



THE GRADUATE SCHOOL

Department #686 GRADUATE INTERNSHIP

THE GRADUATE SCHOOL

VALPARAISO UNIVERSITY

Valparaiso, Indiana 46383-6493

(219) 464-5313 or (800) 821-7685

SELF-TRANSPORTATION AGREEMENT

I acknowledge that I will be solely responsible for my own transportation to and from any and all field assignments, internships and other class related student driving, while I am a student at Valparaiso University, either because the University is not providing transportation or because it is, and I have chosen not to use it. I will provide my transportation in a safe and responsible manner. I will assume all responsibility and risks related to or in any way connected with these trips and related activities, including the transportation of any other passenger(s) to and from any field assignment or activity. I agree to indemnify and hold harmless The Lutheran University Association, Inc. (d/b/a Valparaiso University), its directors, agents, or employees (hereafter called Valparaiso University) from any claims, lawsuits, and related expenses arising out of the use of such transportation.

I also hereby release Valparaiso University from all actions, damages, claims, or demands which I, my heirs, executors, and administrators, or assigns may have against Valparaiso University, its successors, or assigns for all personal injuries, known or unknown, and injuries to property, real or personal, caused by, related to, or arising out of the any and all field assignment or activity.

I understand and agree that Valparaiso University will not have medical personnel available at any field assignments, internships or activities. I understand and agree that Valparaiso University is granted permission to authorize emergency medical treatment, if necessary, and that such action by Valparaiso University shall be subject to the terms of this agreement. I understand and agree that Valparaiso University assumes no responsibility for any injury or damage that might arise out of or in connection with such authorized emergency medical treatment.

I agree that my signature denotes my affirmation that I will abide by all state, local, and federal laws as well as the standards of conduct required by the Valparaiso University *Student Guide to University Life*, including prohibitions against possession or use of alcohol and drugs, and I understand that violations thereof may result in disciplinary action. I further acknowledge that Valparaiso University specifically prohibits my use of a 15-passenger van for the transportation of myself and/or other students to and/or from any field assignment or activity and agree not to ride in or transport others in such a vehicle.

By signing this form, I indicate that I understand and adhere to the current Valparaiso University Travel Policy as shown at http://www.valpo.edu/generalcounsel/travel_policy/studtravel.php.

THIS IS A RELEASE OF LEGAL RIGHTS. READ AND BE CERTAIN YOU UNDERSTAND IT BEFORE SIGNING. I, the undersigned, have read this release and understand all of its terms. I execute it voluntarily and with full knowledge of its significance. (Under 18 requires parental/guardian signature.)

Printed Student Name

Student Signature

Date

Signature of Parent or Guardian
(if participant is under 18)

Return completed agreement to the applicable Faculty or Program Director. This form must be kept in the student file in the applicable college/department for a period of 1 year after graduation or date of last attendance.