

University of New Hampshire Department of Psychology
Acknowledgment of Risk and Consent for Internship Course Participants

Section 1 (To be completed by internship student)

In consideration of being given the opportunity to participate in an internship course offered in connection with my studies in the Department of Psychology at the University of New Hampshire, I hereby:

Acknowledge that there are certain risks inherent in my participation in the internship course that are different in kind and nature than studying in a classroom, including, but not limited to risks arising from:

- Driving to and from the internship site, or while in the course of internship activities;
- Unpredictable or violent behavior of certain client populations served by the internship site;
- Exposure to infectious diseases, including tuberculosis or other airborne pathogens, and hepatitis, HIV or other bloodborne pathogens.

I acknowledge that all risks cannot be prevented and could result in my bodily injury, up to and including death, and agree to assume those risks beyond the control of University faculty and staff. I agree that it is my responsibility to understand and follow the Internship Site's policies and procedures designed to identify and control risks, including safety and security procedures and bloodborne pathogen policies, and to obtain any immunizations, which the Internship Site may recommend or the University require. I agree to complete any additional pre-screening procedures required by the internship site including criminal background checks. I represent that I am otherwise capable, with or without accommodation, to participate in this internship.

I fully and voluntarily accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the internship course.

Should I require emergency medical treatment as a result of accident or illness arising during the internship, I consent to such treatment. I acknowledge that the University of New Hampshire does not provide health and accident insurance for internship participants and I agree to be financially responsible for any medical bills incurred as a result of emergency or other medical treatments. I acknowledge that I have been given the option to purchase students' health insurance through the University. I will notify my Internship Instructor if I have medical conditions about which emergency personnel should be informed. I understand that for the purpose of this internship I am neither an employee of the University of New Hampshire nor of the internship site.

I release, hold harmless, discharge, and covenant not to sue the University of New Hampshire, its administrators, directors, agents, officers, volunteers and employees, (the Releasees) from and against all claims, demands, actions, and causes of action for damages I may have due to personal injury, death, or property damage arising from my participation in the internship course, whether or not the result of negligent acts or omissions on the part of the Releasees.

I will defend and indemnify the University of New Hampshire, its administrators, directors, agents, officers, volunteers and employees from and against all claims, demands, actions, and causes of action for damages sustained or incurred by anyone other than me due to personal injury, property damage or death, arising from my willful misconduct while participating in the internship course.

I agree to abide by the code of ethics of the American Psychological Association in all my work at the internship site and during the internship course. I agree that if I am unclear on the ethics of a situation during the course of internship that I will seek consultation with the internship instructor for my course. I agree to follow all agency policies and regulations except where they may conflict with the ethics code of the American Psychological Association.

I agree to complete all hours of my internship course as delineated in my individual learning agreement. I agree to be bound by the policies of the internship course as outlined in the internship packet.

By my signature below, I acknowledge that I have read, understand, and agree to abide by the terms of this agreement.

Name of Internship Site: _____

Address of Internship Site: _____

Academic Semester of Internship: _____

Printed Name of Student: _____

Signature of Student Date

Signature of Internship Instructor Date

Section 2 (General Information)

Statement on Disability: According to the Americans with Disabilities Act (as amended, 2008), each student with a disability has the right to request services from UNH to accommodate his/her disability. If you are a student with a documented disability or believe you may have a disability that requires accommodations, please contact Student Accessibility Services (SAS) at **201 Smith Hall**. Accommodation letters are created by SAS with the student. Please follow-up with your instructor as soon as possible to ensure timely implementation of the identified accommodations in the letter. Faculty have an obligation to respond once they receive official notice of accommodations from SAS, but are under no obligation to provide retroactive accommodations. For more information refer to www.unh.edu/studentaccessibility or contact SAS at 603.862.2607, 711 (Relay NH) or sas.office@unh.edu.

Psychological and Counseling Services (PACS), formerly the Counseling Center: PACS is located on the third and fourth floors of Smith Hall and can be reached at 862-2090. <https://www.unh.edu/pacs/> PACS offers free confidential services including individual counseling, emergency assistance, group counseling, and consultation.

Sexual Harassment and Rape Prevention Program (SHARPP): Provides free and confidential advocacy and direct services to survivors. (<https://www.unh.edu/sharpp>.)

UNH Affirmative Action Statement: The University of New Hampshire is a public institution with a long-standing commitment to equal opportunity for all. It does not discriminate on the basis of race, color, religion, sex, national origin, age, veteran's status, gender identity or expression, sexual orientation, marital status, or disability in admission or access to, or treatment or employment in, its programs, services, or activities. Inquiries regarding discriminatory harassment should be directed to **Affirmative Action and Equity Office**, 105 Main Street, Thompson Hall 305, Durham, NH 03824, 603.862.2930 (voice), 603.862.2936 (fax), 7-1-1 (Relay NH) affirmaction.equity@unh.edu or to the Regional Director, Office for Civil Rights, U.S. Department of Education, 33 Arch Street, Suite 900, Boston, MA 02110-1491. There are various grievance procedures to provide for the resolution of complaints under this policy. Information may be obtained at the Affirmative Action and Equity Office or on the Affirmative Action and Equity Web site at www.unh.edu/affirmativeaction.