Academic and Professional Enrichment Fund
Policies and Process Agreement Page

My signature below indicates that I have read and understand each of the following statements of the grant policies and process.

- **Faculty Attendance**: The undersigned faculty member will attend said conference with the undersigned student(s).
- **Grant Reimbursement**: The undersigned faculty member understands the grant reimbursement process and will aid the undersigned students in navigating that process. (It is up to the department to decide how the travel will be initially funded, whether that be by department purchases, student out of pocket purchases, etc. OURS will process the request for reimbursement transfer from the sponsoring department upon approval of the student report(s). Information on Grant Reimbursement is available at [www.gvsu.edu/ours](http://www.gvsu.edu/ours).)

Faculty Signature: ____________________________  Date: ____________________________

Unit Head Signature: ____________________________  Date: ____________________________

My signature below indicates that I have read and understand each of the following statements of the grant policies and process.

- **Good Standing with the University**: Each student must have a cumulative grade point average (GPA) of a 2.000 or higher to be in good standing. Each student must be in good judicial standing.
- **APEF Conference Report and Reflection**: Each student must provide a final report and reflection to the Office of Undergraduate Research and Scholarship. Information on the Report and Reflection is available at [www.gvsu.edu/ours](http://www.gvsu.edu/ours).
- **Student Acknowledgment of Professional Conduct and of Risk in Domestic or International Conference Travel**: I have received, read, and acknowledge the attached language regarding professional conduct and risk in conference travel.
- **Student Code**: Each student is expected to adhere to GVSU’s Student Code while representing GVSU. Failure to do so may result in loss of APEF funding. I have reviewed the code at [www.gvsu.edu/studentcode](http://www.gvsu.edu/studentcode) and agree to adhere to the code.

Student Signature: ____________________________  Date: ____________________________

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Student Signature: ____________________________  Date: ____________________________

Student Signature: ____________________________  Date: ____________________________
Student Acknowledgment of Professional Conduct and of Risk in Domestic or International Conference Travel

This document is designed to inform students about some of the potential risks associated with conference, performance, and academic meeting travel. Students have a right to be informed of risks associated with this aspect of their educational experience. Risks can be minimized with proper knowledge and preparation. Students should read through the following document and sign where indicated on previous page.

RISKS OF PARTICIPATION. I understand that there are certain risks inherent in travel, whether foreign or domestic, and fully accept those risks. Risks may include, but are not limited to, the hazards of travel by airplane, boat, train, car, bus or other forms of transportation, political or civil unrest, different or unstable legal, social or economic conditions, war, quarantine, different standards of design, safety and maintenance of buildings, lack of accessibility and accommodations for persons with disabilities, public health risks, criminal activity, adverse weather conditions, terrorism, exposure to infectious, communicable and other diseases, ill effects of unfamiliar food and water, physical exertion or emotional distress, accident, injuries, or damage to property, lack of competent medical services, natural disasters, differences in the recognition of civil rights, differences in gender expectations, differences in acceptance of different sexual orientations, differences in educational systems and expectations, and government restrictions. I understand that not all hazards and dangers associated with my participation in the conference, performance, or academic meeting can be foreseen. I understand that it is impossible for GVSU to guarantee my absolute safety and that my participation in the program exposes me to certain risks and dangers which may result in serious physical injury, sickness or death and/or damage to, or loss or destruction of property. If this travel occurs outside of the United States, I have conducted my own review of the U.S. Department of State’s Country Information, Travel Alerts and Worldwide Caution advisory, and I have reviewed the Center for Disease Control’s recommendations on travel to the countries or regions that I will be traveling to and through.

PROFESSIONAL CONDUCT. Grand Valley State University, through its official representatives, including, the Office of Undergraduate Research and Scholarship, has the authority to establish rules of conduct necessary for participating in conference, performance, and academic meetings. Students are expected to follow all university polices that guide student behavior in the Student Code of Conduct, including, but not limited to Academic Integrity of Grades and Scholarship Policy, Anti-Harassment Policy, False Information Policy, and the Sexual Misconduct Policy. Students are also held to the professional organizations statements/policies on professional conduct if applicable.

TRAVEL. I understand that I may be traveling during the program by various modes of transportation including but not limited to airplane, train, bus or van, and I release GVSU and its official representatives from any responsibility for loss of property, injury or death during such travel.

INSURANCE COVERAGE. I understand that the University will not provide me with health, accident, or hospitalization insurance during my conference travel and I will be responsible for all expenses incurred in the event of an accident or injury.

MEDICAL TREATMENT. I understand that there are health risks associated with travel, both domestic and international, and I agree that I am personally responsible for obtaining all health information, immunizations, and prophylactic medications appropriate to my participation in any conference, performance, or academic meeting travel. In the event that this conference, performance or academic meeting involves international travel, I agree to consult with a medical doctor with regards to my personal medical needs, including disclosure of the location(s) of travel. I certify that there are no health-related reasons or problems that preclude, restrict or recommend against my participation in the conference, performance or academic meeting at this time. In the event of illness or injury to me to such an extent that I am unable to make decisions relative to my immediate medical condition, I authorize any official representative of GVSU to secure medical treatment on my behalf, including surgery, blood transfusions, and the administration of an anesthetic, and I accept all financial responsibility for such authorized treatment. I acknowledge that GVSU is not responsible for the quality of such treatment or care. I release GVSU, the program and its officers, trustees, agents and employees, from any liability for authorizing such treatment.

DISCLOSURE. I understand that GVSU may contact my parent(s) or other designated emergency contact and disclose otherwise confidential or private information, including but not limited to, medical information, disciplinary concerns or legal issues, if such disclosure is necessary or desirable in order to assist or resolve an emergency or crisis involving me.

RESPONSIBILITY DURING FREE TIME. I understand that during free time within the period of this activity, I may elect to do things independently at my own risk and expense. I agree to inform an official representative of GVSU of my plans and understand that neither GVSU nor its official representatives are responsible for me while I am acting independently during such free time.

THEFT AND OTHER CRIMES. I agree to release GVSU and its official representatives from any liability for damage to or loss of my possessions, injury, illness, or death arising out of intentional acts of third parties during the period of the program.

WITHDRAWAL. I understand that I will be held accountable for the cost of travel beyond the grant amount. If I am unable to attend the conference, I understand that I need to inform OURS at least five business days before the date of planned departure. Additionally, I understand that I may forfeit any nonrefundable deposit I will remain responsible for all unrecoverable costs incurred.

GENERAL RELEASE AND WAIVER. In consideration of conference travel through Grand Valley State University, I the undersigned, in full recognition and appreciation of the dangers and hazards inherent in traveling and to which I may be exposed during my participation in this conference/exhibit/performance/academic meeting, do hereby agree to assume all the risks and responsibilities surrounding my participation identified below or any independent activities undertaken as an adjunct thereto; and, further, I do for myself, my heirs, and personal representative(s) hereby defend, hold harmless, indemnify, and release, and forever discharge all its officers, agents and employees from and against any and all claims, demands, and actions, or causes of action, on account of damage to personal property, or personal injury or death which may result from my participation, and which result from causes beyond the control of, and without the fault or negligence of Grand Valley State University, its officer, agents or employees, during the period of my participation as aforesaid.

Rev. 8/19/2019