Student Exchange Programme Waiver of Liability

The Waiver of Liability is required for all student exchanges and should be signed by the student, the home Student Exchange Officer, and the host Student Exchange Officer. If there is a failure to sign the waiver, the Federation will not be held accountable for any legal liability of the participating organisations. This is a binding waiver of liability agreement which should be read carefully and in its entirety.

Participation:

- 1. I have voluntarily agreed to participate in the Student Exchange Programme provided by the International Pharmaceutical Students' Federation ("the Federation") and my home organisation.
- 2. I understand that I must pay the Student Exchange Programme fee of 42 Euro or another amount that the home organisation has determined. The entire amount can not exceed 126 euros.
- 3. I am aware that I may not have a guaranteed Student Exchange Programme place despite paying the Student Exchange Programme fee. In the case in which I do not get any offer for a placement, only 18 euros from the 42 Euro will be returned to me.
- 4. I fully understand that the Federation is not responsible for determining the aspects of the exchange.
- 5. I agree to fully comply with the conditions outlined by the host organisation and the host pharmacist/pharmacy/organisation/institution.
- 6. I am aware that if I do not comply with the conditions of the exchange, my application form will be deemed 'unsuccessful' and I may be banned from participating in the Student Exchange Programme the following year.
- 7. I am fully responsible for organising my own travel visa to the host country.
- 8. I am fully responsible for obtaining health insurance or any other kind of insurance if needed for practice in the country I am travelling to.
- 9. I confirm that the information provided in the Student Exchange Programme application form is correct, complete, and accurate.
- 10. I am aware that I need to fill in an evaluation form after the completion of my exchange, in order to be issued a Student Exchange Programme certificate.
- 11. I am aware that I need to send all documents requested by the host organisation.

Acceptance of responsibility:

- 1. I am participating in the Student Exchange Programme at my own risk.
- 2. I am personally responsible for covering all the financial expenses related to my exchange.
- 3. The Federation will not be held responsible for any persons becoming injured physically, mentally, or in any other form.
- 4. The Federation or host organisation will not be held responsible for any kind of damages, accidents, or injury I may cause during the length of my exchange.
- 5. The Federation or host organisation will not be held responsible for any kind of damages, accidents, or injury caused by natural calamities.

- 6. The Federation or host organisation will not be held responsible for any kind of damage, theft or loss of personal belongings.
- 7. I am personally responsible for any costs of any (para)medical services I may need during my stay abroad for the exchange.

I agree to the fact that the agreement between the Federation and myself regarding the exchange programme, including this waiver of liability, shall be governed by Dutch law and that the Dutch courts shall be exclusively competent regarding legal issues of any kind concerning the aforementioned agreement.

By submitting my application form in the Student Exchange Programme database, and by signing this waiver. I hereby agree to comply with all the above conditions as stated in this Waiver of Liability.

Personal Data Agreement:

I agree that the personal data collected in the Student Exchange Programme application form will be processed by the Federation, the relevant Student Exchange Officers, host pharmacist/pharmacy/institution, and any other person who needs it for the organisation of my exchange.

I understand that the data will be used solely for the purpose of the organisation of my exchange and will be deleted upon my personal request, after contacting the IPSF Chairperson of Student Exchange at sep@ipsf.org.

Applicant Signature

Date

Home SEO Signature

Date

Host SEO Signature

Date