



AT HOPKINS

Agreement to Abide by Program Expectations and Regulations

Students enrolled in Johns Hopkins University Summer at Hopkins coursework must comply with the university's undergraduate academic regulations, policies, and procedures governing student life and academic integrity. Rules and regulations provide the basis for a reasonably ordered academic community. Without the personal appropriation of the values they protect, the mere observance of regulations falls short of Johns Hopkins University's expectations. Johns Hopkins University summer online courses have the same expectations for academic rigor, student achievement, and course conduct integrity as face-to-face courses offered by the university.

Please review the following sections and complete forms where necessary:

Adhere to Johns Hopkins University Policies and Procedures

Students are held accountable to all Johns Hopkins University policies and procedures that govern students. Please review the following policies closely as violations may lead to documented violations and dismissal from courses:

- Homewood Undergraduate Academic Ethics Policy
- Student Conduct Code
- Discrimination and Harassment Policy and Procedures
- Sexual Misconduct Policy and Procedures
- Acceptable Use and Security of Johns Hopkins Information Technology Resources

Review Your Summer Course Schedule and Policies

Students are responsible for their course schedule and adherence to all university and coursespecific policies and procedures, including modifying schedules, attendance, completion of assignments, tuition payment, and refund guidelines.

To View Your Enrollment Summary:

- 1. Login to the JHU Student Information System (SIS)
- 2. Click the My Class Schedule link located under Registration.
- 3. Click the circle next to Enrollment Summary.
- 4. Select the Summer 2022 Academic Period from the dropbox.

Please review the Summer at Hopkins Course Change and Refund Timelines page to familiarize yourself with the process and timeline.

Requesting Academic and/or Residential Accommodations

Johns Hopkins University is committed to providing reasonable accommodation for students with documented disabilities. Student Disability Services (SDS) works with students to ensure they have the accommodation they need to be successful.

To receive accommodation for a disability, a student must register with the JHU Office for Student Disability Services. You must register no later than two weeks before the first day of class.

To request accommodations for this summer, please complete the <u>SDS Registration Form</u>. If you have registered with SDS for accommodations during a previous summer term, please contact <u>studentdisabilityservices@jhu.edu</u> to ask about renewing your accommodations for the current term.

To learn more, please visit the <u>Student Disability Services</u> website. Please contact <u>studentdisabilityservices@jhu.edu</u> if you have any questions about accommodating students in your courses or using the Accommodate faculty portal.

By signing below and submitting it as my electronic signature, I acknowledge that I have read and understood the terms above and that I intend to be bound by my signature. I understand and agree that my electronic signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Student Signature

Date

Parent/Guardian Name

Parent/Guardian Signature

Date





AT HOPKINS

Waiver and Release - Online

I/my child will abide by all program rules and regulations. I/my child understand that failure to obey the rules and policies stated in the JHU Summer at Hopkins Program Policies may lead to my/their dismissal from the Program. I/my child understands that if I/my child violate a rule or regulation, I/my child will be subject to administrative action, up to and including immediate dismissal. I/my child further understand that in the event I/my child is dismissed due to academic or conduct violations no refund will be granted, regardless of progress in the program. After being notified of dismissal, I/my child will not be permitted to attend classes or take examinations, and my child will be withdrawn from the program without receiving a grade or credit.

I hereby approve my/my child's participation in the educational program(s) in which I/my child are enrolled. To the best of my knowledge, there are no behavioral or other conditions that will interfere with my/my child's appropriate participation. I understand that if a JHU staff member asks me/my child to report to the Student Health & Wellness Center, Counseling Center, or other applicable Johns Hopkins University entities due to actions that are considered to be a danger to the welfare of me/my child, failure or refusal to comply may result in dismissal from the program. If the Student Health & Wellness Center, Counseling Center, or other applicable Johns Hopkins University entities deems me/my child to be a danger to themselves or others, I/my child will be dismissed from the program.

I/My child may participate in academic activities including but not limited to, working with sharps (e.g., needle, scissors etc.) forceps, skin suture pad, chemicals, and/or exposure to sensitive content. Some medical programs may involve discussions of human illness, disease, and death, viewing graphic representations of human illness and disease, exploration of human anatomy and bodily systems, and participation in faculty supervised dissections, voluntary, physical examinations (including, but not limited to, cardiovascular examination with a stethoscope, measuring BMI, examination of the eye with an ophthalmoscope, and/or examination of the ear, nose, and throat using an otoscope).

My or my child's participation in the Program is entirely voluntary. I recognize and acknowledge that I/my are at risk for physical injury, illness, accident, disability, death, damage to personal property, monetary loss, or other contingencies as a result of participating in or attending the Program or related activities. I voluntarily assume all of the foregoing risks, the results and consequences thereof, and understand that JHU assumes no responsibility or liability for or in connection with the foregoing. I further understand that JHU assumes no responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance, in the event of injury, illness, accident, disability, death, monetary loss or property damage or other contingencies.

I agree to release and indemnify, defend and hold harmless JHU and its employees, officers and agents from any and all liability and damages or losses I or my child may suffer to our persons or property or both which arise out of or occur during my or my child's participation in the Program. I agree that this Release is to be construed in accordance with the law of the State of Maryland, and that if any portion of this agreement is held invalid, the remainder of the agreement shall continue in full force and effect. I acknowledge that I have read this entire document, and I agree to its terms.

By signing below and submitting it as my electronic signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Student Signature

Date

Parent/Guardian Name

Parent/Guardian Signature

Date





OPKINS

The Family Educational Rights and Privacy Act

Under the Family Educational Rights and Privacy Act (FERPA), most information about you from Johns Hopkins University records, including grades, is considered confidential and, with certain exceptions, generally may not be released to third parties, including your parent(s) or guardian(s), without your written consent.

You may authorize Johns Hopkins University to release information from your records to your parent(s), guardian(s), or other individuals, scholarship organizations, or third parties by completing the information requested below.

Please note that without this authorization, JHU's ability to disclose information from your records to your parent(s) or guardian(s) or to speak with your parent(s) or guardian(s) about information from your records will be significantly restricted. You are urged to inform your parent(s) or guardian(s) of this fact if you decide not to execute the authorization form.

I authorize Johns Hopkins University to disclose any and all information from my records to the individuals listed in the form below. This consent will remain in effect while I am enrolled at JHU.

Authorized Individual	Relation

By signing below and submitting it as my electronic signature, I acknowledge that I have read and understood the terms above and that I intend to be bound by my signature. I understand and agree that my electronic signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Student Signature

Date





IOPKINS

Film and Photography Release

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(*print first and last name*) ("Participant"), am enrolled in Summer at Hopkins coursework during the summer of 2022 ("Program"). I,

(print first and last name) certify that I am the parent or legal guardian of the aforementioned Participant in the Program.

I understand that as part of the Program I or my child may be filmed or photographed by Johns Hopkins University ("JHU") and its employees, officers, and agents. I, on behalf of myself or my child, hereby irrevocably grant to JHU and its assigns and licensees the right to photograph, film, and record me or my child and to use such photographs, films and recordings of my or my child's voice, likeness, and name, in connection with the Program and for promotion and/or advertising purposes. I hereby irrevocably grant to JHU a worldwide, non-exclusive, royalty free, perpetual license to upload, display, perform, exhibit, transmit, and stream the Program for promotion and/or advertising purposes and in future programs, including on openly accessible websites, as JHU deems appropriate. These grants are perpetual. I agree that I shall have no right of approval and no claim to compensation hereunder.

I agree to release and indemnify, defend and hold harmless JHU and its employees, officers and agents from any and all liability and damages or losses I or my child may suffer to our persons or property or both which arise out of or occur during my or my child's participation in the Program. I agree that this Release is to be construed in accordance with the law of the State of Maryland, and that if any portion of this agreement is held invalid, the remainder of the agreement shall continue in full force and effect. I acknowledge that I have read this entire document, and I agree to its terms.

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Student Name	Student Signature	Date
Parent/Guardian Name	Parent/Guardian Signature	Date