

Student Acknowledgement of Risk

DATE:

STUDENT NAME:

You have been placed with _____ to complete your _____ course.
(Site Name) (Course Number)

Please acknowledge that you understand that there is a global COVID-19 pandemic and that there are health risks associated with participating in a placement with _____. Specifically,

1. I understand the hazards of the novel coronavirus (“COVID-19”) and am familiar with the Centers for Disease Control and Prevention (“CDC”) guidelines regarding COVID-19. I acknowledge and understand that the circumstances regarding COVID-19 are changing from day to day and that, accordingly, the CDC guidelines are regularly modified and updated, and I accept full responsibility for familiarizing myself with the most recent updates.
2. Notwithstanding the risks associated with COVID-19, which I readily acknowledge, I hereby willingly choose to participate in activities at the _____.

Please also acknowledge that you intend to adhere to these CDC guidelines:

1. Limit travel to local areas, including work and essential businesses in a private vehicle.
2. Submit to health screening before entering the workplace if required.
3. Adhere to hygiene procedures including frequent handwashing, avoiding touching your face, cleaning high touch surfaces, and physical distancing.
4. Stay home if you or any others with whom you come in contact develop symptoms of illness.
5. Use of personal protective equipment as required, including but not limited to wearing a mask as required by law or _____.

In the event the University of Kentucky transitions to online/remote learning, you will be given the opportunity to continue in your placement at _____ should you and _____ both agree to the continued placement. Your decision to continue in your placement with _____ constitutes a continued acknowledgement of risk as defined in this agreement.

STUDENT SIGNATURE: _____