Sacramento State
Community Engagement Center

INFORMED CONSENT, AGREEMENT, RELEASE, WAIVER OF LIABILITY, AND
ASSUMPTION OF RISK

FOR GOOD AND VALUABLE CONSIDERATION, including permission to participate in the Sacramento State
(“University”), Community Engagement Center service learning program and activities related to course
(print course name and number) ____________________________________________
I, (print first and last name) _______________________________________________ for myself, my successors, heirs,
assigns, executors, and administrators:

1. Warrant that I am at least 18 years of age. (If under 18, please submit the parental consent form in lieu of this waiver).
2. Agree and understand that my work and experience in the Community Engagement Center service learning
program in no way creates an employee/employer relationship with the University. I agree and understand that my
participation is voluntary and purely that of being a student at the University.
3. Agree that I am responsible for my transportation to and from the placement site. The placement site may be located
in various locations away from the University campus. The placement site shall be my field experience (or Internship)
worksite. A safe commute is my sole responsibility and expense.
4. Agree that prior to participating I will inspect the placement site’s facilities, equipment and areas to be used, and, if I
believe any of them are unsafe, I will immediately advise the person supervising the activity, facility, or area;
5. Acknowledge that I fully understand that my participation may involve risk of injury or death, including economic loss
which may result not only from my own actions, inactions, or negligence, but also from the actions, inactions, or
negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted,
or this type of event or activity.
6. Agree to maintain Health Insurance at my own expense that covers my person while I am a student and while
participating in this program.
7. Assume any and all risks of personal injuries to myself, including medical or hospital bills, permanent or partial
disability, death, and damage to my property, caused by or arising from my participation in this event or activity and
the negligence of the University;
8. Covenant not to sue or present any claim for personal injury, property damage, or wrongful death against the
University, its officers, agents or employees, attributable to my participation in the event or activity and the negligence
of the University;
9. Release, waive, discharge and relinquish the University and its officers, employees, and agents from any liability,
loss, damage, claim, demand or cause of action against the University arising from or attributable to my participation
in the event or activity and the negligence of the University;
10. Warrant that I am in good health and to the best of my knowledge have no physical condition that would prevent me
from participating in this event or activity;
11. Agree to submit to any placement site-required background checks and respect their rules of privacy. I may be
terminated from participation at this site with or without cause.

INFORMED CONSENT, AGREEMENT, RELEASE, WAIVER OF LIABILITY, AND ASSUMPTION OF RISK

MY SIGNATURE ON THIS DOCUMENT RELEASES CALIFORNIA STATE UNIVERSITY, SACRAMENTO FROM LIABILITY FOR
MY PERSONAL INJURY, WRONGFUL DEATH, AND PROPERTY DAMAGE ARISING FROM MY PARTICIPATION IN THIS
ACTIVITY AND THE NEGLIGENCE OF THE UNIVERSITY. I HAVE READ THIS DOCUMENT, UNDERSTAND THAT I HAVE
GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT VOLUNTARILY.

STUDENT NAME (PRINT) STUDENT SIGNATURE DATE

STUDENT CONTACT PHONE STUDENT SACLINK ID / SACLINK EMAIL ADDRESS

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