

On-Site, In-Person Internship During  
COVID-19 Pandemic  
*Special Release, Indemnification and  
Hold Harmless Agreement*  
Career Education Office

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Name: \_\_\_\_\_

Expected date range and location of internship (Internship):

\_\_\_\_\_  
\_\_\_\_\_

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**By signing this document, I agree to the following:**

**ACKNOWLEDGEMENT OF RISK.** I understand that the College has recommended that students engage in only remote internships this summer, and I understand that participation in an on-site, in-person Internship presents risks to me personally due to the existence of the COVID-19 pandemic, which is ongoing in the United States. These risks can include infection with the virus, illness and death. I agree that I am responsible for evaluating and understanding the risks I may face in engaging in an in-person Internship, whether as a component of the Internship, during travel to or from the Internship site, or separate from it.

**ACKNOWLEDGEMENT OF GOVERNMENT AND PUBLIC HEALTH AUTHORITY GUIDELINES.**

- A. I understand that the White House has issued [guidelines](#) for reopening the country or portions thereof under a three-phased approach (“White House Guidelines”). I have read and understand these guidelines.
- B. I agree that it is my responsibility to conform to the “guidelines for individuals” contained in the White House Guidelines; and to confirm that my Internship employer conforms to the “guidelines for employers” included in the White House guidelines.
- C. I agree to follow all guidelines for individuals related to the COVID-19 pandemic established by the [United States Centers for Disease Control and Prevention](#).

**ACKNOWLEDGEMENT OF GOUCHER COLLEGE’S INTERIM INTERNSHIP POLICY.** I understand that in order to promote the health and safety of Goucher students and the communities in which they live and work, the college is prohibiting all on-site, in-person internships for which a student seeks academic credit and/or financial support from the College unless they occur in states or localities

that are at Phase 2 or Phase 3 of the [White House Guidelines for Opening Up America Again](#) at the start of the internship. For internships occurring in those states and localities, students may request an exemption in order to participate in an on-site, in-person internship, and if approved, they are required to sign this Waiver in order to do so. **INTERNSHIPS AT LOCATIONS THAT ARE IN PHASE 1 OF THE WHITE HOUSE GUIDELINES ARE NOT PERMITTED.**

**SUSPENSION OF INTERNSHIP OR CHANGE IN OPERATING GUIDELINES.** I understand that the on-site, in-person portion of the Internship could be suspended at any time by the Internship site, or by a governmental entity for safety reasons, and that the area in which the Internship occurs may move back into Phase I of the White House Guidelines with little notice. I understand that in such an event, I may be required to follow all Internship site and governmental guidelines and may be required to complete the Internship remotely, if at all. I agree to notify the CEO of any changes to the status of my internship.

**I ACKNOWLEDGE AND UNDERSTAND THAT I AM NOT REQUIRED TO COMPLETE AN ON-SITE, IN-PERSON INTERNSHIP AND THAT THE COLLEGE OFFERS OTHER OPTIONS FOR INTERNSHIPS THAT DO NOT REQUIRE IN-PERSON INTERACTIONS.**

## **I. RELEASE OF CLAIMS**

Knowing and understanding the risks described above, and in consideration of being permitted by the College to participate in the Internship and receive academic credit from the College for participating in the Internship, I individually, and on behalf of my heirs, successors, assigns, and personal representatives, hereby release and forever discharge the college, its employees, agents, officers, trustees, and representatives (in their official and individual capacities) (“Releasees”) from any and all liability whatsoever for any and all damages, losses, or injuries (including death) I sustain to my person or property or both.

This Release includes, but is not limited to any claims, demands, actions, causes of action, judgments, damages, expenses, and costs, including attorneys’ fees, that arise out of, occur during, or are in any way connected with my participation in the Internship or any travel incident thereto.

This release and discharge is effective, **REGARDLESS WHETHER ANY INJURY, LOSS OR DAMAGE IS CAUSED BY THE NEGLIGENCE OF Releasees**, except to the extent caused by the gross negligence or intentional misconduct of Releasees.

## **II. INDEMNIFICATION AND HOLD HARMLESS**

I, individually, and on behalf of my heirs, successors, assigns, and personal representatives, hereby agree to indemnify, defend, and hold harmless the Releasees from any and all liability, loss, damage, or expense, including attorneys’ fees, that arise out of, occur during, or are in any way connected with my participation in the Internship or any travel incident thereto.

This Indemnification and Hold Harmless agreement applies, **REGARDLESS WHETHER ANY INJURY, LOSS, DAMAGE OR EXPENSE I EXPERIENCE IS CAUSED BY THE NEGLIGENCE OF Releasees**, except to the extent caused by the gross negligence or intentional misconduct of Releasees.

**SEVERABILITY.** If any portion of this Agreement is held invalid, the remaining portions shall continue in full force and effect.

**GOVERNING LAW.** This document shall be construed under the laws of the State of Maryland.

In signing this Agreement, I acknowledge that I have read this entire document, that I understand its terms and that I have signed it knowingly and voluntarily. No representations, statements, or inducements, oral or written, apart from the foregoing written statement have been made.

**THIS IS A RELEASE OF LEGAL RIGHTS.  
READ AND UNDERSTAND THIS DOCUMENT BEFORE YOU SIGN.**

Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Name (printed): \_\_\_\_\_