

OHIO SEA GRANT AND STONE LABORATORY

Consent Form 2017

Please sign and upload both pages of this form to your application.

1. CERTIFICATION IMPORTANT! READ STATEMENT AND SIGN BELOW.

I affirm that the information that I have provided on the 2017 Stone Lab Application and any other information that I have submitted or will submit to The Ohio State University in connection with the admission and financial aid process is complete and accurate and is my own work. I understand that submission of incomplete or inaccurate information is sufficient cause for revocation of admission or enrollment.

I authorize each academic institution I have attended to release my academic and personal information to The Ohio State University in connection with the admission and financial aid process. Pursuant to the Family Educational Rights and Privacy Act of 1974, as amended (FERPA), I hereby authorize The Ohio State University to release the information provided by me, as well as other official and unofficial Ohio State information regarding my academic progress and status, to scholarship donors for the purpose of providing the donors with information concerning my eligibility as a scholarship recipient.

Applicant Name (please print)		Parent/Guardian Name (please print)	
Applicant Legal Signature	Date	Parent/Guardian Legal Signature (if applicant is under 18 years old)	Date
X		X	

2. PERSONAL (Describe any physical limitations or health problems. Use supplemental sheet if necessary)

Are you able to perform the duties/tasks associated with field excursions? "Field excursions" may include, but are not limited to, traveling and working on a large research vessel with limited seating, walking in streams, hiking on potentially rocky terrain, and wading in hip to chest deep water.

- A. Yes No If no, please explain. Use supplemental sheet if necessary.

Do you need to request accommodations due to the impact of a disability? A disability can include a physical or mobility limitation, a sensory limitation with vision/ hearing /touch/smell/taste, a learning disability, a psychiatric condition, a communication disorder such as Autism Spectrum Disorder, ADHD, etc.

- B. Yes No If yes, you will be contacted by Stone Lab staff with instructions on how to register with the OSU Office of Student Life Disability Services which will assess your request. (Office of Student Life Disability Services 614-292-3307 or slds@osu.edu)

3. PHOTO RELEASE

I give The Ohio State University permission to publish in print, electronic, or video format the likeness or image of myself. I release all claims against the University with respect to copyright ownership and publication, including any claim for compensation related to use of the materials. **I CERTIFY THAT I HAVE READ, UNDERSTAND, AND AGREE TO BE BOUND BY THIS RELEASE.**

Applicant Signature (required)	Date
X	
Parent/Guardian Signature (also required if applicant is under 18 years old)	Date
X	

4. HOUSING & COMMUNITY STANDARDS OF CONDUCT

All applicants must sign the following statement: I agree to abide by the Community Standards of Conduct as published in the Stone Laboratory Handbook while participating in the program (go.osu.edu/SLconduct).

Applicant Signature	Date
X	
Parent/Guardian Signature (if applicant is under 18 years old)	Date
X	

5. 2017 REQUEST TO PARTICIPATE AND RELEASE FROM LIABILITY

I hereby request permission to enroll in course(s) and participate in activities offered through F.T. Stone Laboratory's 2017 summer program. I am aware that such enrollment may involve participating in activities that could present a risk of injury or serious bodily harm. Examples of such activities include:

- a.) observing or collecting organisms, including wild and possibly poisonous plants and animals;
- b.) using field and lab equipment, including sharp-edged, high-voltage, and boat-deployed equipment;
- c.) crossing rough terrain and other vigorous activities;
- d.) boating and other aquatic activities;
- e.) participating in field trips and related transportation.

I acknowledge that I am not required to enroll in such course(s) or participate in such activities but have voluntarily chosen to do so at my own risk. I have had the opportunity to ask questions about the content of the course(s) and the nature and potential risks or hazards of activities associated with Stone Lab's summer program, and to have them addressed to my satisfaction. I certify that I am able to safely participate in such coursework and/or activities offered by Stone Lab and agree to comply with all safety rules and instructions provided by employees or agents of the University.

In consideration for the University's permission to enroll in such course(s) and/or participate in such activities, I hereby hold harmless and release, for the participant and/or myself, as well as my heirs, executors, administrators and assigns, The Ohio State University and its employees, agents, officers, and trustees from liability for injury, loss, or damage of any kind suffered by the participant during coursework or activities related in any way to Stone Lab. I understand that this means that I am giving up the right to seek legal action against Ohio State for any such injury, loss, or damage.

I CERTIFY THAT I HAVE READ, UNDERSTAND, AND AGREE TO BE BOUND BY THIS RELEASE.

Applicant Signature (required)	Date
X	
Parent/Guardian Signature (also required if applicant is under 18 years old)	Date
X	

6. PARENTAL STATEMENT OF UNDERSTANDING (for high school applicants only)

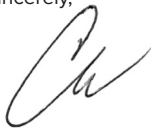
Dear Parents,

Stone Lab immerses students in a science experience that they will draw from for the rest of their lives. While we want students to have fun, it's important to remember that Stone Lab courses are challenging college courses, with mandatory daily attendance both in class and on field excursions. Evening activities are also common.

While there are always adults on Gibraltar Island, students are expected to manage their own schedules and workload. The only mandatory curfew is for students under 18, who are required to be on the island by 10 p.m. each night.

We believe Stone Lab to be a challenging but rewarding experience for all of our students, and hope that you'll agree.

Sincerely,



Chris Winslow
Interim Director

My son/daughter and I understand and accept the information provided above regarding his/her participation in courses at Stone Laboratory.

Parent/Guardian Signature	Date
X	

PLEASE SIGN FOR YOUR HIGH SCHOOL SON/DAUGHTER REGARDLESS OF HIS/HER AGE.