School of Social Work and Criminal Justice

T CRIM 372 Adult Corrections

Participant Agreement, Acknowledgment of Risk and Consent for Treatment

The purpose of the field trip to the WA Department of Corrections Community Corrections Tacoma Field Office in T CRIM 372 Adult Corrections is to gain firsthand exposure to and knowledge of the goals of community corrections, resources provided, and responsibilities of community corrections officers and victim service providers, in relation to course objectives and class activities. This required field trip occurs on Wednesday, July 17, meeting at 9:30 am at the Field Office for a tour and conversation with community corrections officers and victim service providers. The visit will run from 9:30 until approximately 12:00. The field office is at 1016 S 28th St. Tacoma, WA 98409.

I acknowledge that my participation in this activity is required and my course grade and evaluation may depend on this activity. I further acknowledge that my part in these activities entails, but is not limited to, the following condition, circumstance and risks:

1. Transportation to the field trip site is my responsibility. I understand that I am responsible for my own personal safety and security, to and from the site as well as during my visit to the site.
2. All transportation and parking fees (if any) will be at my own expense.
3. Travel may include visits to high crime neighborhoods or areas with high volumes of traffic and/or increased traffic accidents.
4. I understand that I may have to walk 2 – 4 blocks on paved surfaces, possibly uphill.

I further acknowledge that I am responsible for:

1. Carrying enough funds to cover my personal expenses (if any) on the trip, as well as unforeseen expenses that might arise;
2. Conducting myself in a professional manner at all times during the trip;
3. Making arrangements with my professors in any other course where the class meeting time conflicts with the time period for this trip. I understand that this trip does not relieve me of my responsibilities in other courses.

I acknowledge that I am engaging in this trip as a required activity for T CRIM 372 and, as with any field trip participants, may encounter unexpected risks. These risks include (but are not limited to) sickness, exposure to disease, accident, bodily injury or death, the forces of nature, travel dangers on the ground, and property loss and damage, and I agree to assume such risks beyond the control of University staff. I represent that I am capable, with or without reasonable accommodation, of undertaking this activity. Should I require emergency medical treatment as a result of accident or illness arising during the trip and be unable to consent to such treatment at the time, I hereby consent to emergency medical treatment. I am aware that the University of Washington does not provide health and accident insurance for field trips and that I will be financially responsible for any bill incurred.

I acknowledge that apart from the academic content of the study tour, the University of Washington is not responsible for acts of third parties which cause injury, death, property loss or damage agree not to claim against the University of Washington for injuries, damages or losses other than those arising from the negligent acts or omissions of the University of Washington, its employees, students and agents in the course and scope of their University-imposed duties. We require each course participant to sign this statement as an indication that this position is understood and accepted. By signing this, I understand that the Student Conduct Code of the University of Washington applies to all program participants.

Participant’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(legal guardian must sign if participant is under 18 years of age)

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Print Name

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Emergency Contact (optional) Contact’s Phone Number