Guidelines for Student Independent Travel

I: General Travel Statement:

Typically all Austin Peay State University (APSU) programs depart as groups from Nashville International Airport (BNA). Most program fees include the cost of the airline ticket and APSU expects all students and faculty to travel with the group. Any exceptions must be approved in advance by APSU. The determination whether to allow a student to make travel arrangements separate from the program is entirely discretionary on the part of APSU and any denial of such request is final. Requests from independent travel will only be considered after a student has been accepted into an APSU study abroad program.

II: Guidelines for making individual travel arrangements:

1. Student must request permission from APSU in order to be considered for a request to travel separate from the group. The student must send a request to APSU Office of Study Abroad and International Exchange (internationaled@apsu.edu) seeking permission to make individual travel arrangements by the current academic year. No requests for individual travel arrangements will be considered after the current year’s program fee payment deadline.

2. After receiving approval, student must submit the Individual Travel Arrangements form confirming to APSU that s/he takes personal responsibility for obtaining his/her own travel arrangements. S/he will remain on the APSU passenger list and will be charged the full program fee (including airfare) until written confirmation to remove them from the list is received.

3. Student will provide APSU with a copy of his/her e-ticket confirmation including the itinerary along with contact information no later than 30 days before departure. In addition, a student that elects to drive his/her own personal vehicle to Canada will also need to submit a waiver of liability vehicle form.

4. If granted approval, student must meet the study abroad group arrival at a designated location in the program country. Students must have a way to communicate with the faculty coordinator and APSU in case of delays with the group or the student.

III: Please initial acknowledging agreement to the following:

_____ If the student elects to travel to the program country prior to the start date and/or delay return to the US following the completion date of the program, s/he will be responsible for any cost involved with that travel. PLEASE NOTE: These costs may include but are not limited to: arrangements for lodging, travel, food, health insurance and incidentals necessary during the additional time s/he is abroad.

_____ The student will be responsible for paying all APSU program fees less than the amount of the APSU program airfare discount. The adjusted amount of the program fee is due by the program fee deadline and is subject to the cancellation policy as stated on the APSU website.

_____ The student will not be responsible for any financial implications incurred if a trip is cancelled. APSU reserves the right to cancel any course or program due to low enrollment or an updated travel advisory/warning issued by the U.S. State Department any time before the program departure date. APSU will inform students in as timely a manner as possible but assumes no financial responsibility for the individual ticket a student purchases in the event of a cancelled program.

_____ During any travel the student elects to do outside of APSU arrangements, s/he is personally responsible for his/her own safety and welfare. You are responsible for any complications experienced by you outside of the program arrangements.

I understand and agree to these conditions.

Print Name/Date

APSU Faculty Coordinator

Student Signature

OSAIE Director
WAIVER OF LIABILITY/HOLD HARMLESS AGREEMENT
TO DRIVE/RISE IN PERSONAL VEHICLE

The undersigned desires to participate in an activity/trip to ____________________________________________________________________________
and related activities being offered by the State of Tennessee, including its subsidiaries, the Tennessee
Collaborative Academy, the Tennessee Board of Regents (TBR), the University of Tennessee (UT), the
Tennessee Department of Education and Austin Peay State University (APSU). The undersigned assumes all
responsibility and risks related to or in any way connected with this trip and related activities, including the
transportation of the individual and any other passengers to and from the activity/trip.

In consideration of the opportunity to participate in said activity/trip, the undersigned does for himself, his
heirs, executors, successors and assigns, release, waive, discharge and covenant not to sue the State of
Tennessee or its subsidiaries, the Tennessee Collaborative Academy, the TBR, UT, the Tennessee Department
of Education, and APSU, their employees, agents, successors and assigns, of and from any and all actions,
causes of action, claims, demands, damages, costs, loss of services, expenses and compensation arising out of,
on account of, related to, or in any way connected with the undersigned(s) use of a personal vehicle and
participation in this trip and related activities including the transportation of the individual and any other
passengers to and from the activity or trip.

The undersigned agrees to all Rules and Regulations set forth by the State of Tennessee, Austin Peay State
University, and as may be appropriate, the Tennessee Collaborative Academy.

IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of
Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no
oral representations, statements, or inducements, apart from the foregoing written agreement, have been
made; I am at least eighteen (18) years of age and fully competent; and I execute this Release fully intending
to be bound by same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this ________ day of _____________,
20______.

________________________________________________________________________  __________________________________________________________________________
Print Name/Date                                           Student Signature

________________________________________________________________________  __________________________________________________________________________
APSU Faculty Coordinator                                  OSAIE Director

Return to the Office of Study Abroad and International Exchange