

FLORIDA A&M UNIVERSITY COLLEGE OF EDUCATION



STUDENT/PARENT HANDBOOK



MISSION STATEMENT

The Black Male College Explorers Program is an at-risk prevention/intervention program designed specifically to prevent black males from dropping out of high school; facilitate their admission to college; and significantly increase their chances of earning a college degree. Middle and high schools from Tallahassee and cities throughout Florida are selected for participation. Participating schools are asked to identify at-risk males enrolled in grades 7th through 11th.

A team of school and community leaders are required to provide “supportive services for the students” during the academic year. Florida A&M University provides six weeks of highly concentrated developmental experiences, which includes courses in various academic subjects, weekly character education seminars, workshops and motivational trips, during the summer.

In addition to providing other instruction in non-specialized courses, the Black Male College Explores Program will promote educational opportunities that encourage each student to develop personal responsibility, respect for individual differences, and an inquiring mind so that each student will continue to learn, develop and apply skills to become a productive citizen in an ever-changing society.



MONARCH'S CREED

I AM A SONG OF KINGS. I STRIVE FOR EXCELLENCE WITHOUT EXCUSE.

I ALONE AM RESPONSIBLE FOR MY LEARNING.

I CHOOSE TO BE SUCCESSFUL FOR MYSELF,
FOR MY FAMILY AND FOR MY PEOPLE.

I CHOOSE TO TAKE THE INITIATIVE
TO MAKE PARADIGM SHIFTS THAT WILL ENHANCE MY LIFE.

I CHOOSE TO EMPOWER MYSELF BY MAKING
DECISIONS THAT REFLECT WISDOM, FOCUS,
VISION AND SPIRITUALITY.

I CHOOSE TO BE A RESPECTFUL,
HUMAN CITIZEN, A COMMITTED
LEARNER AND A SERIOUS TEST-
TAKER. I WILL CONTINUE THE RICH
LEGACY OF THOSE WHO HAVE GONE
BEFORE ME. I CHOOSE TO STRIVE
FOR THE APEX OF EXCELLENCE!

MY QUEST IS MY PERSONAL BEST!



TABLE OF CONTENTS

Mission Statement.....	2
Monarch's Creed.....	3
Daily Schedule	5
Rules	6
Dress Code	7
Transportation	8
Off Campus Activities	8
Home Visits	8
Grievances Policy	9
Sick Policy	9
Meals	9
Money	9
Personal Property	9
Laundry	10
Contraband Items	10
Smoking & Drug Policy	10
Visitation.....	10
Group Count.....	10
Personal Hygiene	11
Telephone Calls	11
Mail	11
Stipend	11
BMCEP Expectations	11
Dormitory Rules.....	12
Black Male College Explorers Program Discipline Plan.....	13
Point System/Recommendation	15
Student Information School Release Form	17
Application.....	18



DAILY SCHEDULE

MONDAY THROUGH FRIDAY

Wake Up	6:00AM-6:45AM
Room Check	6:50AM-7:25AM
Breakfast (Depart for Dining Hall)	7:30AM-8:25AM
Classes	8:30AM-11:55AM
LUNCH	12:00N-1:00PM
Classes	1:05PM-4:00PM
DINNER	4:05PM-5:00PM
Supervised Study/Call Meeting	TBA
Structured Recreation	6:00PM-8:45PM
Curfew Bedtime/Quiet Hour	10:30PM-11:00PM
Curfew Weekend	12:00 MIDNIGHT



RULES

RULES

- ✓ NO Students are to be without supervision without permission.
- ✓ NO Aggressive behavior toward BMCEP Staff
- ✓ MUST attend class daily
- ✓ NO Lying
- ✓ NO Stealing
- ✓ NO Borrowing
- ✓ No Horseplay
- ✓ NO Fighting
- ✓ NO Threatening
- ✓ NO Profanity
- ✓ NO Arguing
- ✓ NO Talking or disrespecting staff
- ✓ NO Playing staff against staff
- ✓ NO Loitering after lights out
- ✓ ABSOLUTELY NO tobacco products, alcohol or drugs
- ✓ No Defacing University property
- ✓ NO Gambling
- ✓ NO Tardiness for meetings or class
- ✓ NO Inappropriate dressing
- ✓ ASK Permission
- ✓ DO Laundry on assigned days
- ✓ MUST Maintain good hygiene
- ✓ NO Ear phones from 6:00AM - 5:00PM
- ✓ NO Weapons
- ✓ No Pornography
- ✓ ABSOLUTELY NO EXCEPTIONS

***PARENTS MUST SIGN THE STUDENT CODE OF CONDUCT ACKNOWLEDGEMENT FORM**



DRESS CODE

Students are expected to dress appropriately and in morally good taste at all times. Appearance is to be neat and the student is to be properly groomed at all times for the occasion. BMCEP believes that clothing and appearance are often a reflection of the behavior and attitude of the student. Therefore, we have instituted a positive dress code to establish positive behaviors. This dress code is not to impede the freedom of expression or to dictate what should be worn, but it is designed to exhibit a positive image and to prepare you for the years beyond. We hope that this will provide the aptitude to chart the choices and attitudes that exist based upon appearances that determined success and failure in the real world.

The following **WILL NOT BE ALLOWED** during your six weeks stay at BMCEP:

- Half shirts/or shirts which have been cut off. Allowed only in dormitory or recreation area (*Not to be worn on main campus or field trips*).
- Hats or Caps will be worn outside buildings only and never worn backward
- 'Thong Sandals' (*other than to wear to the shower*)
- Hair that is unkept
- Jewelry or T-shirts that refer to sex, drugs, alcohol, profanity or other inappropriate insignias
- Fishnet shirts/sleeveless T-Shirt or necklace or sleeveless under garment
- Cut-off or cut-out ripped jeans
- Baggy pants or shorts which expose undergarments or body parts
- Untucked shirts, unless designed to be worn outside (*i.e. Pockets. side vents*)
- Bathrobes, pajamas, housecoats, bedroom shoes outside the dormitory

NOTE: Students' pants must be worn around the waist and not the hip. Pants that do not fit the waist will be sewn to fit the waistline. Sunglasses cannot be worn inside buildings.

STUDENTS MUST BRING:

- A belt or suspenders
- A suit or sport coat and slacks
- Jacket (s) Dress shoes
- Neckties (not a clip-on)
- Dress shirts

BMCEP will provide two program shirts to be worn on identified days and all field trips.

OTHER: ANYTHING DETERMINED TO BE INAPPROPRIATE BY BMCEP



TRANSPORTATION

Students are not allowed to have a car on campus during their stay here. Transportation to all events are provided by the program, and students must accompany the program to all events unless cleared otherwise through the Director.

Transportation rules will include the following:

- No foul language or indecent behavior.
- No behavior that is distractive to the Bus Driver.
- No horseplay.
- No touching of control panel instruments.
- No yelling out windows.
- No deliberate passing of gas as a joke.
- No littering on Bus.
- Music and loud talking should be kept within your seating area.

OFF CAMPUS ACTIVITIES

Students are required to attend all scheduled off campus activities which include the following:

- Church
- Amusement Parks
- Local Government Attraction
- Local, State and program planned events
- During these activities, students are expected to follow the program code of conduct by conducting themselves in an appropriate manner at all times.

HOME VISITS

Students are allowed to go home not more than two (2) weekends during their stay here at program. This comes only with their parents or guardian's permission. Students are not allowed to go home with other students unless permission is requested in writing by the parent or guardian; one week prior to the week being requested. The parent or guardian making the request must sign the student out with a dorm counselor before trip. Students are not excused before 3:00PM. On Friday and the student must be back on campus by curfew Sunday night at 10:00PM. Exceptions will be considered on a case by case basis.



GRIEVANCE POLICY

BMCEP strives to treat all students respectfully, reasonably and impartially. Students who feel that they are unjustly treated or have a problem with the staff or program, are requested to take the following steps to resolve the issue:

- Talk to a group counselor that is on duty during the time the incident occurred.
- If you do not think the problem is resolved, file a written report with the Student Service Coordinator.
- BMCEP will provide mediation services with the parties involved. If you think that the problem still is not resolved, your next step is to talk to the Director.

SICK

If you feel sick or are injured, you need to see a staff member immediately. If your illness requires professional attention, request to be escorted to the clinic to see a physician. If you feel sick during class hours, but better after the academic day, you must remain in your room for the entire 24 hours.

MEALS

Meals are served in the dining hall three times daily. You are required to have a valid program ID in order to receive meals. You are required to eat during the scheduled program time. Any food you may desire after the scheduled dining hours, you may purchase at your own expense.

MONEY

Meals are served in the dining hall three times daily. You may keep money in your possession as you please, however, we do not recommend keeping large sums of money on you or in areas where others may be aware. (Please try to keep the amount under \$30.00) Stipends are given on a weekly basis. Once the student receives their stipend, BMCEP staff does not take responsibility for lost or stolen money. Budgets are required each week that indicate how you plan to spend the stipend you expect each week.

PERSONAL PROPERTY

Clothes or other items you bring with you to the campus are your responsibility. You are required to complete a property inventory that list all property (i.e. Clothing jewelry, music, etc.). We encourage that they are kept neat and clean, but we cannot guarantee you that by allowing others in your room, misplacing your key or hiding your key outside your room, items will not disappear. We discourage stealing, and dismiss those persons from the program who are found guilty of stealing.



LAUNDRY

The laundry facility is provided on assigned days for this program, students are expected to wash their laundry on those days. Students are expected to keep their clothes clean, folded, ironed and put away in their proper place.

CONTRABAND ITEM

Many items that may be considered acceptable off campus are deemed inappropriate on campus at the summer program. We cannot allow anyone to bring these items on campus because we want to protect you as well as others.

Those items considered contraband are:

- Alcoholic beverages
- Weapons (knives, guns, bats, etc.)
- Glass bottles
- Baseball bats
- Drugs or other illegal substances
- Flammable items

SMOKING AND DRUG POLICY

It is illegal to possess, use or sell tobacco or alcoholic products to anyone under the age of eighteen in the State of Florida. No smoking is allowed during your stay here in the program. Students caught smoking or with tobacco products will lose privileges, items will be confiscated and destroyed. No social drugs of any kind are acceptable.

VISITATION

Students are allowed to visit from room to room, but you must respect the privacy of each person and their property in the room. Female visitors are not allowed inside the dormitory rooms at any time. Parents and relatives are allowed if staff is notified.

GROUP COUNT

A group count is when staff members count all groups to make sure everyone is present. This count is required several times a day. Everyone must be present unless excused by a staff person.



PERSONAL HYGIENE

The summer is a very a hot tie with lots of activities and walking around campus. You are expected to bathe at least one time each day unless a doctor statement states otherwise.

TELEPHONE

Telephone connections are available in each room. Telephone use is not permitted during class hours and after bed curfew (11:00PM). Roommates are to be considerate and respectable of each other with the use of the phone.

MAIL

You are encouraged to write letters to family and friends. If you need writing utensils, ask staff members for it. The following is the mailing address for you during the summer:

Your Name
Florida A&M University
College of Education
Black Male College Explorers Program
306 Gore Education Center – Unit-C
Tallahassee, Florida 32307

STIPEND

The program will provide a stipend of \$25.00 per week for all students.

BMCEP EXPECTATIONS

- Teach Respect For Yourself and Others
- Work Toward Classroom Attendance
- Take and Active Role in the Appropriate Behavior
- Be Polite and Courteous to Others
- Work Toward Respecting Authority
- Word Toward Receiving Feedback
- Work Toward Making Short Term goals
- Work Toward Working with Others
- Work Toward Seeing a Bright Future



DORMITORY RULES

- The purpose of the residential facilities is to provide an atmosphere where a student can study, sleep and fellowship. In the best interest of the FAMU family, all loud sound producers (i.e. Radios, stereo systems, tape players, TV's musical instruments, etc.) shall not be used in an abusive manner.
- All dormitory staff must be respected as authority figures.
- Females are **not permitted** to visit the dormitory rooms and males are not to visit female dormitory rooms.
- Cooking in the bedroom area and/or using an open element or open flame device in residential facilities is not permitted for reasons of excessive electrical usage, pest control, sanitation and fire safety. Appliances such as ovens, heaters, electric frying pans and other heat producing units may not be used in the residential bedrooms.
- Keys and locks are University property and may not be duplicated, exchanged, repaired or replaced. Students will be charged one hundred fifty dollars (\$150.00) for a lost key or a key not returned to authorized persons when vacating the residential facilities.
- State and Federal laws prohibit the use of alcoholic beverages, drugs as well as the possession of firearms or other weapons. Anyone who violates these laws are subject to punishment by law and will definitely be dismissed from the program. Students are not allowed to smoke in the dormitories or to engage in smoking while a participant in the Black Male College Explorers Program.
- University Staff reserves the right to enter rooms for the purpose of inspection, repairs and maintenance, suspected rule violation investigation, and for any conditions which may be in the best interest of the university and the resident.
- Students will respect University property. Vandalism, writing and/or drawing on dormitory walls are prohibited. Each student will be responsible for damages he causes.
- Students should take necessary precautions to safeguard their possessions. The University is not responsible for lost or stolen property. It is recommended that items of high value be left at home!
- Inappropriate behavior (profanity, fighting, discourtesy, vandalism, theft, etc.) will be grounds for dismissal from the program.



BLACK MALE COLLEGE EXPLORERS PROGRAM DISCIPLINE PLAN

OFFENSE	CONSEQUENCE
UNEXCUSED ABSENCES	1st Offense Conference & Work Contract 2nd Offense Conference & Work Contract /Parent Call/Trip Restriction 3rd Offense-Dismissed From Program
TARDY	1st Offense Conference & Work Contract 2nd Offense Conference & Work Contract 3rd Offense Work Contract/Parent Call
CURFEW VIOLATION	1st Offense Conference & Work Contract 2nd Offense Conference & Work Contract /Parent Call 3rd Offense-Dismissed From Program
ABSENCE AT EVENTS	1st Offense Conference & Work Contract 2nd Offense Conference & Work Contract /Parent Call/Trip Restriction 3rd Offense-Dismissed From Program
DRESS	1st Offense Conference & Work Contract 2nd Offense Conference & Work Contract 3rd Offense Work Contract/Parent Call
CUTTING CLASS	1st Offense Conference & Work Contract 2nd Offense Conference & Work Contract /Parent Call 3rd Offense-Dismissed From Program



BLACK MALE COLLEGE EXPLORERS PROGRAM DISCIPLINE PLAN CONT.

DISRESPECTFUL

1st Offense Conference & Report
2nd Offense Conference & Work Contract
3rd Offense Work Contract/Parent Call

DISTRUPTIVE IN CLASS

1st Offense Conference & Work Contract
2nd Offense Conference & Work Contract
3rd Offense Work Contract/Parent Call

SLEEPING IN CLASS

1st Offense Conference & Work Contract
2nd Offense Conference & Work Contract
3rd Offense Work Contract/Parent Call

UNCOOPERATIVE

SUSPENSION

FIRE ALARM

SUSPENSION

DRUG/ALCOHOL DAMAGES

POSSIBLE TERMINATION



POINT SYSTEM/RECOMMENDATION

TOTAL MUST EXCEED 25 POINTS TO RECEIVE EXTRA STIPEND

PUNCTUALITY - ON TIME AND READY FOR CLASS

- 5-Comes in first, ready to begin
- 4-Doesn't have to be asked, one of the first students
- 3-Comes in on time, nothing more, nothing less
- 2- Late to class
- 1-Very late, has to be looked for or called in

PARTICIPATION-INVOLVED WITH CLASS ACTIVITIES COMPLETES WORK

- 5-Completes all work, asks for more, challenges self
- 4-Completes more than expected
- 3-Completes assignments
- 2-Does not work steadily, fails to complete assigned tasks
- 1-Does not make an honest effort to complete assignments

ATTITUDE -MENTAL READINESS FOR CLASS OR ACTIVITY

- 5- Eager, wants to learn, encourages others, very positive
- 4- Obviously self-motivated
- 3- Not a motivator, but doesn't speak negatively
- 2- Complains while participating
- 1-Shows little or no interest, speaks negatively

SUPERVISION-REMAINING IN CLEAR VIEW OF INSTRUCTOR

- 5- Shows leadership by encouraging others to be in productive
- 4- Shows leadership by staying in and volunteer – a good example
- 3- Stays in supervised area as expected
- 2- Has to be reminded repeatedly to stay in control
- 1-Willfully decided to be out of control



POINT SYSTEM/RECOMMENDATION CONT.

LEADERSHIP/APPEARANCE – ROLE MODEL TO OTHER STUDENTS

- 5- Sets a good example, helps others, exemplary behavior, takes charge of the situation
- 4- Does more than required, leads by example
- 3- Sets an example by meeting requirements
- 2- Negatively overshadows positive influence
- Doesn't set positive examples, negatively influences others



STUDENT INFORMATION SCHOOL RELEASE FORM

_____ is authorized to release academic history and applicable standardized test data (i.e. current report card, SAT 10, FCAT scores) of the student identified below to the FAMU Black Male College Explorers Program for educational purposes.

_____	_____	_____
Student Name	Grade	Date of Birth

_____	_____
Parent/Guardian Signature	Date

Release of Information or Request for Review of Student Information

I hereby authorize _____ to release the following
School Name
portion of the records regarding my child.

Name: _____ Birth Date: _____ Grade: _____
which includes:

- Educational data, including tests of intellectual process, and academic abilities, present levels of subject area performance, academic improvement plans, and individual educational plans.

I hereby authorize the exchange of information and records pertaining to the above named child between _____ and the Black Male College Explorers Program that have had significant contact with my child. Information will not be disclosed to any party except personnel with a legitimate educational interest without prior written consent of the parent or legal guardian.

_____	_____
Authorized Signature/Date	Relationship

_____	_____
Address	City/State/Zip

_____	_____
Home Telephone	If no telephone, please give a telephone number where you can be contacted



BLACK MALE COLLEGE EXPLORERS PROGRAM APPLICATION
JUNE 8, 2014 – JULY 18, 2014

PURPOSE:

The goals of the program are to increase the amount of black males graduating from high school, facilitate their admission to college, and significantly increase their chances of earning a college degree.

MISSION STATEMENT:

The Black Male College Explorers Program is an At-Risk prevention/intervention program designed specifically to prevent black males from dropping out of high school; facilitate their admission to college and significantly increase their chances of earning a college degree.

Middle and high schools from Tallahassee and cities throughout Florida are selected for participation. Participating schools are asked to identify at-risk males enrolled in grades 7th through 11th. A team of school and community leaders are required to provide “supportive services for the students” during the academic year.

Florida A&M University provides six weeks of highly concentrated developmental experiences designed specifically for black males during the summer. Courses include several of academic subjects, such as English, Mathematics, General Science, Art, African American Studies, Computer Sciences and Foreign Language, weekly character education seminars, workshops and motivational trips—during the summer. A weekly stipend is also provided.

ELIGIBILITY REQUIREMENTS:

A high school black male; A 7th, 8th, 9th, 10th, or 11th grade student at the beginning of the summer session; A depressed grade point average that does not adequately represent the potential of the student; A history of disciplinary problems or the propensity to display irregular behavior; An expressed interest in the program; Any unique situation/problem that makes a student potentially at-risk. Willingness to consider post-secondary education after high school;

COST: (Participants cost may vary)

Students selected by participating schools must pay a (\$300.00) Three Hundred Dollar Registration Fee.

Non-Participating School: Tuition options include:

1. For in-state students outside of Leon County - \$1,700.00.
2. For Leon County students - \$1,600.00.
3. For out-of-state students' - \$1,600.00 and transportation cost.

The program cost includes transportation to and from the campus of Florida A&M University, lodging, food, books and classroom materials and a weekly (\$25) stipend is provided at no cost to the students selected for sponsorship. Other students may be included if parents or local community organization(s) sponsor them.

The entire **APPLICATION MUST BE COMPLETED** “no exception” and mailed with an official copy of student transcript.

*Fee(s) are subject to change without notice.



ATTACH PHOTO

BACKGROUND INFORMATION: (Entire Application Must Be Completed)

Name: _____
 Last **First** **M. I.** **Nickname/Optional**

Home Address: _____ **Home Phone:** _____

Social Security Number: _____ / _____ / _____ **Date of Birth:** _____

Age: _____ **Sex:** _____ **Ethnic Background:** _____

City: _____ **State:** _____ **Zip:** _____

Parent Information

Person to Contact in Case of Emergency: _____

Relation to Student: _____ **Phone:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Email Address: _____

Name of School you are currently attending for 2013-2014: _____ **Current Grade Level (2013-2014):** _____

Address of School: _____ **City:** _____ **FL:** _____ **Zip:** _____

Name of School you are expected to Attend Next School 2014-2015 Year: _____

Check Area of Interest:

_____ Architecture	_____ Education	_____ Business
_____ Arts & Sciences	_____ Engineering	_____ CESTA
_____ Allied Health	_____ Nursing	_____ Journalism
_____ College of Pharmacy	_____ Specific Profession if Applicable	

NOTE: The entire APPLICATION MUST BE COMPLETED



Please list current courses:							
Classifications (Presently) circle one:							
	07th	08th	09th	10th	11th	12th	FRS
Cumulative G.P.A.							
Test Scores							
Discipline Referrals							
Absentees							
Tardiness							
Suspensions							
Incarceration Record							
Current Class Schedule							
Expected Date of Graduation (month and year)							
List the organizations to which you belong and the honors you have received:							
Special Skills/Hobbies:							
List work or volunteer experiences relevant to your profession interests: (Use back of this page if needed)							
Position(s)	Duties/Responsibilities					Dates	

An official copy of student transcript is required to process your application. It must accompany this application.



DISCIPLINE RECORD:

Please attach a copy of student discipline record showing reasons given for referral and or actions taken.

COUNSELOR:

FACULTY RECOMMENDATION:

Please ask a teacher who is familiar with student's work to complete the following section.

TEACHER:

Please indicate below the number of years you have known the applicant and based on program criteria, why you think he would make a good candidate for the Black Male College Explorers Program (BMCEP) at Florida A&M University. The following information should be included:

1. Why student is considered At-Risk.
2. List specific problems/reasons that influenced your recommendation of student to this program.
3. Include student academic performance (i.e. reading level etc.,).
4. List students specific characteristics that may include:
 - a. quiet/talkative
 - b. respectful/disrespectful
 - c. friendly/hostile/pugnacious
 - d. others as applicable

Name: _____
Position: _____
School: _____
Phone: _____
Date: _____



STUDENT INFORMATION SCHOOL RELEASE FORM

_____ is authorized to release academic history and applicable standardized test data (i.e. current report card, SAT 10, FCAT scores) of the student identified below to the FAMU Black Male College Explorers Program for educational purposes.

_____	_____	_____
Student Name	Grade	Date of Birth

_____	_____
Parent/Guardian Signature	Date

Release of Information or Request for Review of Student Information

I hereby authorize _____ to release the following
School Name
portion of the records regarding my child.

Name: _____ Birth Date: _____ Grade: _____
which includes:

- Educational data, including tests of intellectual process, and academic abilities, present levels of subject area performance, academic improvement plans, and individual educational plans.

I hereby authorize the exchange of information and records pertaining to the above named child between _____ and the Black Male College Explorers Program that have had significant contact with my child. Information will not be disclosed to any party except personnel with a legitimate educational interest without prior written consent of the parent or legal guardian.

_____	_____
Authorized Signature/Date	Relationship

_____	_____
Address	City/State/Zip

_____	_____
Home Telephone	If no telephone, please give a telephone number where you can be contacted



STUDENT CODE OF CONDUCT ACKNOWLEDGEMENT FORM

Student' Name: _____ Grade: _____

I have received a copy of the Black Male College Explorers Program Student Code of Conduct (*Parent/Student Handbook*). I understand that these policies and disciplinary procedures will be enforced at Florida A&M University Black Male College Explorers Program, therefore if I am found to be in violation of any of these policies, I can expect to receive disciplinary actions in accordance to this document.

Upon signing this form I agree to adhere to the disciplinary structure set forth by its tenets. I also agree to work to maintain the integrity of the Black Male College Explorers Program and the educational process set forth by the Black Male College Explorers Program administration, faculty and staff.

Student Signature: _____ Date: _____

Parent/Guardian Name: _____

Name of Student: _____ Grade: _____

I have received a copy of the Black Male College Explorers Program Student Code of Conduct. I understand that these policies and disciplinary procedures will be enforced at the Black Male College Explorers Program, therefore if my child is found to be in violation of any of these policies, I can expect them to receive disciplinary actions in accordance to this document.

Upon signing this form, I therefore agree to enforce the compliance of the disciplinary structure set forth by the tenets. I also agree to work with my son(s) to maintain the integrity of the Black Male College Explorers Program and the educational process set forth by the Black Male College Explorers Program administration, faculty and staff.

Parent Signature: _____ Date: _____

NOTE: Failure to return this acknowledgement form will result in withdrawal of the application to attend the Black Male College Explorers Program at Florida A&M University. By signing this form, you are acknowledging that you have read and understood the guidelines as set forth in this document. Therefore, you will not be relieved of any of the responsibilities and/or disciplinary actions due to lack of knowledge of its content.



MEDICAL CONSENT FORM

I _____, parent, parent/guardian of _____
(Student's Name)

by my signature below, grant authority to the staff of the Black Male College Explorers Program (BMCEP) to refer my child for preventive, corrective, routine and emergency medical and dental care as needed during the period he is associate with the project.

 Signature of Parent/Guardian

 Date

List any current prescribed Medication: _____ **None:** _____

Does the student have any existing medical conditions of which we should be aware of?

Yes _____ No _____ (If Yes, please describe below.)

PHOTO CONSENT

Son's Name: _____

_____ You have permission to use my son's picture/image in the yearbook.

_____ Sorry, I do not want my son's picture/image in the yearbook.

Parent's Signature: _____

Date: _____

COUNSELING SESSIONS CONSENT

I _____, custodial parent/legal guardian of _____
 grant permission for the above-named child to participate in individual and/or group counseling sessions. I understand that the information disclosed in these sessions is privileged and may only be released to me with the written consent of my child.

BMCEP PARENTAL/GUARDIAN CONSENT STATEMENT FOR RELEASE OF STUDENT RECORDS

The Black Male College Explorers Program has my permission to periodically review the Academic and Discipline Records of my child upon request, by letter or in person.

 SIGNATURE OF PARENT/GUARDIAN



INSURANCE COVERAGE QUESTIONNAIRE

Please fill in this Insurance Coverage Questionnaire and return it as soon as possible. This will enable us to better serve your child's needs.		
Do you have insurance coverage for your child?	Yes:	No:
If so, answer the following:		
A. Does this insurance cover:		
1. Hospital Care?	Yes	No
2. Surgical Care?	Yes	No
3. In Hospital Medical Care	Yes	No
4. Accident Coverage?	Yes	No
B. What is the name of the Insurance Company? (Please send a copy of Insurance Card)		
C. Address of the Company:		
_____ (Street)	_____ (City)	_____ (State)
_____ (Zip)		
D. Policy Number:		
E. Effective Date of Policy:	Expiration Date of Policy:	
F. When the Policy expires, will you renew it?	Yes	No
H. Other features of your Insurance Coverage not described, such as dental or vision.		

(Name of Child)

Signature of Parent(s)

“If you require a reasonable accommodation pursuant to the Americans with Disabilities Amendment Act (ADAA), please contact the Office of Equal Opportunity Program at (850) 599-3076 at least 10 working days prior to the start of the event.”



ALTERNATE PICKUP/RELEASE FORM

The individual listed is authorized to pick-up my son(s) in my absence. **(Must be completed and notarized before student can be released)**

Alternate Pickup Name: _____

Parent/Guardian Signature: _____ Date: _____

**For Notary Use Only
(Please do write below this line)**

Sworn to and subscribed before me this _____ date of _____, 20____.

Notary Signature

(To be completed by alternate pick-up person on site)

Alternate Person Driver's License Number: _____

Last 4 digits of Social Security: _____

Home Phone: _____ Cell Phone: _____

Signature: _____ Date: _____

Counselor/Dorm Supervisor Signature: _____ Date: _____

Thank you for your interest in the Black Male College Explorers Program (BMCEP). The deadline for the application for the Institute is **April 20, 2014**, **"No Exception."** Mail the completed application with an official copy of student transcript to:

**Florida A&M University
College of Education
Black Male College Explorers Program
305 Gore Education Center, Unit-C
501 Orr Drive
Tallahassee, Florida 32307
(850) 561-2407 or 561-2408
Fax: (850) 599-8098**



Summer Program Information Sheet – Please Read Carefully

The Buses will pick up Florida students on **Sunday Morning, - 1st pickup begins at 1:00AM in West Palm Beach, FL, and arrive in Tallahassee, FL on Sunday noon/evening at Florida A&M University Paddy-Foote Dorm**

1. Parents or sponsors **must mail** the enclosed Florida A&M University Medical Consent and Liability Release Form, Summer Programs Consequences for Violating RULES, and the Domestic Travel Participation Agreement prior to arriving on campus.
2. Students should bring their own telephone. The university provides telephone jacks in each room for local calls only. We recommend providing students with telephone cards for long distance calls. Cellular telephones are permitted; however, *under no circumstances will they be allowed during class instruction or church services.*
3. Students are only allowed two pieces of regular size luggage, no trunks. Please pack accordingly since space is very limited on the bus and in dormitory rooms. The following items are suggested.
4. Students must bring at least two (2) twin sheets, one (1) pillow and one (1) pillowcase. Additionally, two (2) sets of towels and wash cloths are recommended. Students requiring additional cover for their beds must bring their own spreads or comforters.
5. Students shall bring their own personal hygiene items such as toothpaste, toothbrush, soap, deodorant, shampoo, mouth wash, combs & brushes for hair, and any other essentials.
6. Earrings will not be allowed or worn at any time during the program and we strongly encourage that all jewelry, expensive clothing, and electronic items be left at home. The university (FAMU) is not responsible for any lost or stolen items. Please do not bring any items of value.
7. Students should bring casual clothing for very hot weather 85-100 degrees, such as polo shirts or button down shirts, kaki or denim slacks. Students will have dress day on each Friday; we recommend a **white button down shirt, dark socks, belt, black necktie, black dress slacks and black dress shoes** for each Friday.
8. Students will wear a suit or sports coat and slacks to church services each Sunday. Pants shall not be more than two inches larger than waist size and pants will not be worn lower than two inches below the navel.



9. While regular short pants are permissible (mid-thigh or slightly above the knee), gym short will not be allowed in classrooms or other formal settings for instance; all cafeteria meals will require appropriate neat dress. Students should label all their clothing and other personal items for identification if lost or stolen.
10. The program will pay for summer health insurance for each participant; however, students with family or personal health insurance should bring proper credentials. Tallahassee Memorial Regional Medical Center Hospital and Tallahassee Community Hospital will be available for emergency and after hour general care. Parents and Students will inform the Black Male College Explorers Program (BMCEP) of all prescribed medicines required for allergies or any condition that may require special attention or causes a health hazard.

All administrators, advisory committee members, mentors, parents, and teachers are invited to attend the ***Annual Awards Banquet and Ceremony held on Thursday, July 17, 2014.*** This ceremony concludes our summer program and rewards our young men on a Job Well Done!



Florida Agricultural and Mechanical University

TALLAHASSEE, FLORIDA 32307-3100

Office of Risk Management

TELEPHONE: (850) 599-3453
FAX: (850) 412-5438

Florida A&M University – Medical Consent and Liability Release

This is a legal and binding agreement which, when signed, will permanently limit your ability to recover from the parties indicated below for injuries or losses you may sustain as a result of participation in Summer Camp or Summer Academic Program activities.

References to Florida A&M University (henceforth referred to as FAMU) include Florida A&M University, acting by and through its Board of Trustees, the Florida Board of Governors, the State of Florida, its agents, officers, faculty and employees..

PLEASE READ CAREFULLY.

MEDICAL CONSENT FORM

I hereby grant permission for emergency medical service to be rendered as deemed necessary to my child (or myself). I do hereby voluntarily consent and authorize FAMU, in the event of an accident, illness or injury to take whatever measures and actions considered necessary and warranted under the circumstances to protect, safeguard and minimize further injury, health and safety. I understand that such actions may involve or require placement in a hospital or another medical facility for services and treatment. Any transportation expenses by any mode will be a debt and liability for which I accept total responsibility.

I hereby further declare, represent and agree, that in the event that FAMU has to exercise the above voluntarily given medical authorization and consent, that I hold harmless, release and forever discharge FAMU from any and all liability, damages, claims and demands whatsoever, including attorneys fees and court cost, which the undersigned, any heir or assigned has made.

Finally, I hereby declare and represent that I have read this statement, understood its contents, execute it of my free will and choice, and agree to be legally bound by it.

Initial _____

CONTINUE WITH NEXT SECTION

LIABILITY RELEASE

By signing this *MEDICAL CONSENT and LIABILITY RELEASE*, I assume any and all liability for any accident, injury, illness, damages or loss that may occur during participation or as a result of Summer Camp Activities at FAMU.

In consideration for the acceptance into or voluntary participation in the above stated activity/event, I/We hereby release, waive and discharge any and all demands and claims for, but not limited to, damages, personal injury, property damage, illness, death or loss which I may have or which hereafter accrue to me, against FAMU due to participation in or as a result of the above mentioned activity/event. This release will discharge and hold FAMU harmless from and against any and all liability and demands (including attorney fees and court cost) arising out of or connected in any way with participation in or as a result of the above mentioned activity/event, even though that liability may arise out of negligence on the part of persons or agencies mentioned above.

I/We further understand that damages, accidents, injuries or death could arise out of participation or as a result of the abovementioned activity/event. Knowing this, I hereby agree to assume those risk and to release and hold all agencies and persons mentioned above harmless who (through negligence or carelessness) might otherwise be liable to me.

I/We fully understand and agree this disclaimer, release, waiver and assumption of risk, is to be binding on my heirs and assigns.

I HAVE READ THIS ENTIRE RELEASE. I FULLY UNDERSTAND IT AND AGREE TO BE LEGALLY BOUND BY IT.

Print Name of Minor or Participant (if under 18 years old)

Minor's Date of Birth

Print Name of Parent, Legal Guardian or Custodian

Print Name of Participant if 18 years or older)

Signature of Parent, Legal Guardian or Custodian

Date

Signature of Participant if 18 years or older

Date

Address

Phone Number (s)



FLORIDA A&M UNIVERSITY
OFFICE OF THE PROVOST & VICE PRESIDENT FOR ACADEMIC AFFAIRS
DIVISION OF CONTINUING EDUCATION
SUMMER PROGRAMS POLICIES AND RULES

Summer camp participant policies and rules include, but are not limited to the following:

1. Campers will be respectful of their peers and instructors and obey program staff.
2. Campers must report to their designated classes, activities and assigned areas on time and comply with all curfews.
3. Campers will adhere to appropriate dress code (e.g. no halter tops, tube tops, bare backs, shirts that show cleavage and midriff, excessively baggy or tight fitting clothes, sagging pants, clothing that displays profanity, vulgar, discriminatory, suggestive language, promotes in any way gang affiliation, tobacco, alcohol, drugs, or any other way distracting, no hats or do-rags are to be worn in buildings other than the dorm.)
4. Campers will wear appropriate identification at all times. This includes a camp identification card with a lanyard worn around the neck. Additionally, as a safety measure, camp identifying apparel (T-shirts, hats, etc...) will be worn when campers are participating in activities away from the University.
5. Campers will not be permitted to wander around the campus unsupervised. They will have an escort (counselor, mentor, or resident advisor) with them at all times.
6. Campers are prohibited from engaging in, but not limited to, the following:
 - a. Drinking alcohol, possession, using, or selling drugs, and smoking cigarettes. Only medications prescribed by a physician are permitted. If camp participants have prescription drugs, make sure the director and staff are aware of the medication;
 - b. Fighting, using profanity, gambling, or possession of any type of weapon; fireworks, lighters, or matches ;
 - c. Hazing, bullying (verbal and/or physical abuse or cyber-bullying), or harassment;
 - d. Tampering with emergency equipment (including but not limited to fire alarms);
 - e. Having members of the opposite sex in their rooms;
 - f. Displaying aggressive behavior or using profanity, racial slurs, or insults;
 - g. Destroying FAMU or private property;
 - h. Leaving group activities without permission or distracting group activities;
 - i. Cheating or sleeping in the classroom;
 - j. Stealing or robbery;
 - k. Using cell phones in the classroom, study sessions, or structured activities;
 - l. Having visitors on campus, especially in the dorms. Female campers will reside in the girl's dorm and male campers will reside in the boy's dorm. Parents/Guardians may visit with staff permission;
 - m. Playing late-night video games;
 - n. Leaving the campus or designated site without permission. No one without express permission and a PICTURE ID (including camp staff) is allowed to pick up a camp participant; only with permission and proper identification can the camper be picked up from a designated site; and
 - o. Participating in such University activities as Freshman Orientation parties or fraternity and/or sorority parties.

7. Campers will not engage in hazing activities. There is zero tolerance for **HAZING**. It is the policy of Florida Agricultural and Mechanical University (BOT Regulation 2.028) that any persons affiliated with the Florida Agricultural and Mechanical University are prohibited from engaging in any form(s) of hazing activities. Any persons having knowledge of or receiving information regarding hazing or violation of the Regulation must report it to the FAMU Department of Public Safety within 24 hours. The commission of such acts will incur penalties from the individual staff or camper's dismissal up to program suspension. Additionally, penalties may be imposed for violation of criminal law as prescribed by s. 1006.63, Florida Statutes.
8. Campers must maintain sleeping area in a safe and sanitary manner (e.g. clean their rooms daily).
9. All campers who will be leaving the program after an evening culminating activity must check out of the dorm with the Program Coordinator prior to the activity.
10. Each camper must have a signed Travel Authorization and a Medical Release Form on file.
11. All programs will have a centralized location for checking campers in and out. No parent, guardian, sibling, or other relative will be permitted to pick up a camper without prior notice to the Camp Director. The person picking up the camper must present a valid form of identification and must be listed on the authorized pick up list. Parents and guardians will be informed of these rules to avoid confusion and delays in checking out campers. No camper will be released without notice and identification. Campers who are checked out by a parent or guardian must be back at the dorm by a time specified at checkout. Emergencies will be the exception. There shall be a head count conducted every night to make sure all campers are accounted for.
12. Campers are not permitted to have a car on campus. If they have jobs, they must make other arrangements to get to the job site.
13. On October 1, 2012, new mandatory reporting child abuse requirements became effective in Part III, Chapter 39, Florida Statutes. Such mandatory reporting requirements were made applicable to colleges and universities, in addition to the pre-existing reporting duties. Specifically, section 39.305, Florida Statutes, subjects colleges and universities to a \$1 million fine for each failure of its administrators and law enforcement agency to report known or suspected child abuse, abandonment, or neglect committed on the property of the university or during a university-sponsored event or function to the Department of Children and Families (DCF). Pursuant to the above-referenced statute, the Florida Board of Governors promulgated Regulation 3.002 to provide additional guidance to Universities on the issue. Section 39.305, Florida Statutes and BOG Regulation 3.002 are incorporated herein by reference.

Summer programs take place on FAMU's campus and program activities are considered University-sponsored events or functions. Therefore, summer program representatives (e.g. administrators, directors, counselors, faculty, staff, etc.) have a duty to protect our vulnerable summer program participants by immediately reporting known or suspected child abuse, abandonment, or neglect committed on the property of the university or during a university-sponsored event or function. Reports shall be made to DCF, FAMU Department of Public Safety and to Ms. Phyllis Watson, Director, Continuing Education.

CONSEQUENCES FOR VIOLATING SUMMER PROGRAMS RULES

Class I Violations

- Tardy to class or activity
- Failure to report to an assigned area
- Leaving class without permission
- Loud talking or running in any building
- Cheating in class
- Inappropriate dress
- Unauthorized use of FAMU or other campers' property
- Use of cell phone or any electronic device during structured activities
- Failure to maintain sleeping areas in safe and sanitary manner
- Disobeying program staff
- Failure to open room door for assigned program staff

Consequences of Class I Violations

- First Offense - Conference with student, director, and adult camp staff member.
- Second Offense - Conference with student, director, adult camp staff member, and parent/guardian and denial of privileges.
- Third Offense - After meeting with director, camp director/coordinator and Summer Programs Coordinator, student will be immediately dismissed from the program for the remainder of the summer.

Class II Violations

- Gambling or betting with money
- Profanity, racial slurs, insults, and bullying
- Unauthorized visitors on campus
- Personal car on campus
- Disruptive behavior during structured activities
- Un-escorted around campus at any time
- Pulling the fire alarm or tampering with emergency equipment
- Aggressive, disrespectful, and/or abusive behavior or lack of courtesy toward other campers

Consequences of Class II Violations

- First Offense - Conference with student, director, adult camp staff member, and parent/guardian and denial of privileges.
- Second Offense - After meeting with director, camp director/coordinator and Summer Programs Coordinator, student will be immediately dismissed from the program for the remainder of the summer.

Class III Violations

- Possession or use of alcohol or illegal drugs (Notify police)
- Possession or use of any kind of weapon (e.g. knives, firearms) (Notify police)
- Possession or use of fireworks, matches or lighters
- Possession or use of tobacco
- Fighting, threat of physical abuse or bullying (Police will be notified)
- Leaving campus without permission
- Males entering female dormitory or females entering male dormitory
- Breaking curfew away from dorm
- Hazing (Police will be notified)

- Stealing or robbery
- Aggressive, disrespectful, and/or abusive behavior or lack of courtesy toward camp staff
- Intentional damage to private property or university facilities; vandalism/trespassing (Police will be notified)
- Sexual behavior
- Parental harassment of staff or someone else's child

Consequence of Class III Violations

After meeting with director, camp director/coordinator and Summer Programs Coordinator, student will be immediately dismissed from the program for the remainder of the summer.

ACKNOWLEDGEMENTS

As a parent/legal guardian of a summer program participant, I understand and acknowledge that my child's participation in a summer program held at Florida A&M University requires adherence to specific program rules, University summer program rules attached hereto and incorporated herein by reference, applicable University regulations and policies, and state and federal law. The summer program representative, University official, and/or law enforcement will be the sole determiner of whether my child's actions are in violation of the aforementioned. If my child's actions are in violation of specific program rules, University summer program rules, applicable University regulations and policies, or state and federal law, my child's participation in a summer program may be terminated.

I understand and acknowledge that should my child's participation in the program be terminated, my child is required to leave the program immediately and I am solely responsible for arranging and paying for my child's transportation back home, and I will receive no refund of any fees. Should I refuse to arrange and/or pay for my child's transportation after termination from the program, I understand and acknowledge that my failure may constitute child abandonment and statutorily requires Florida A&M University to report the incident to the Florida Department of Children and Family Services and my child will be delivered/transported to the appropriate State authority.

I have read and understand these policies, rules, violations and consequences and agree to follow them during the entire summer camp.

Camper's Signature

Date

I understand these policies, rules, violations and consequences and agree to support Summer Program Staff in implementing them in regards to my child. I accept responsibility for explaining these rules and consequences to my child and further accept responsibility for my child's actions and will take appropriate action to make sure his/her behavior is acceptable during this camp.

Parent's Signature

Date



Florida Agricultural and Mechanical University

TALLAHASSEE, FLORIDA 32307-3100

Office of Risk Management

TELEPHONE: (850) 599-3453
FAX: (850) 412-5438

DOMESTIC Travel Participation Agreement

This is a legal and binding agreement which, when signed, will permanently limit your ability to recover from the parties indicated below for injuries or losses you may sustain as a result of participation in off-campus activities.

References to Florida A&M University (henceforth referred to as FAMU) include Florida A&M University, acting by and through its Board of Trustees, the Florida Board of Governors, the State of Florida, its agents, officers, faculty and employees.

PARTICIPATION AGREEMENT

I, _____ freely choose and/or volunteer to participate in the
(Print Name)
trip to _____ on or about _____ to _____
(henceforth referred to as The Trip).

I fully understand that FAMU in no way represents, is not an agent of, and has no responsibility for, any third party, including without limitation any sponsor, that may provide any services including food, lodging, travel, or any services associated with The Trip. I agree to inform myself about the potential dangers of the areas I am traveling to and precautions which should be taken.

I have advised FAMU that there are no health or psychological conditions that preclude my participation in The Trip. I agree to make personal decisions and conduct my private life in an intelligent, prudent fashion, paying particular attention to local conditions. I agree to assume responsibility for the consequences of my own decisions and actions.

I understand that should I have or develop legal problems with any U.S., foreign nationals or government or other person/entity, I will attend to the matter personally with my own personal funds. I understand that FAMU is not responsible for providing any assistance under such circumstances and FAMU will not act as my legal representative if I am detained or arrested.

I agree that participating in any activity is an acceptance of risk of injury or death and property loss or damage. I agree that my safety is primarily dependent upon my taking proper care of myself. I understand that it is my responsibility to know what I will need for The Trip and to provide what I will need. I agree to make sure that I know how to safely participate in any activities, and I agree to observe any rules and practices which may be employed to minimize the risk of harm.

CONTINUE WITH THE NEXT PAGE

Page 1 of 5

I am also aware that there is certain behavior that is unacceptable and could lead to possible disruption of my participation in The Trip. I assure FAMU that I shall act in an appropriate manner at all times. Such behavior shall include times when in the company of other participants on The Trip and when I may be physically separated from the participants on The Trip.

As a FAMU **student** or **employee**, I will abide by the University's Codes of Conduct while on The Trip. I will not wear, use or do anything that would pose a hazard to myself or others, including using or ingesting any substance which could pose a hazard to myself or others. I agree that if I do not act in accordance with this agreement I may not be permitted to continue to participate in The Trip.

Initial _____ CONTINUE WITH THE NEXT SECTION

INFORMED CONSENT AGREEMENT

I understand that despite precautions taken, accidents and injuries may occur. I also understand that travel and other activities undertaken during The Trip may be potentially dangerous and that I may be injured and/or lose or damage personal property as a result of my participation. Therefore, **I ASSUME ALL RISKS RELATED TO THE ACTIVITIES** including but not limited to:

- Death, injury or illness from accidents of any nature whatsoever, including but not limited to bodily injury of any nature whether severe or not which may occur as a result of participating in an activity or contact physical surroundings or other persons; arising from travel by air, car, boat, bus, train or any other means.
- Death, injury or illness including food poisoning arising from the provision of food or beverage by restaurants or other service providers.
- Loss or injury as a result of a crime or criminal act, terrorism, war, civil unrest, riot, detention by a foreign government, arrest or other act of any government or authority.
- Theft of or loss of my personal property while in transit or during The Trip.
- Natural disaster, weather, strikes, wars, hostilities or other disturbances, and alteration or cancellation of The Trip due to such causes.

I acknowledge and agree to accept all responsibility for loss or additional expenses due to delays or other changes in the means of transportation, other services, sickness or injury, weather, strikes, or other unforeseen causes. I acknowledge and understand that FAMU assumes no liability whatsoever for any loss, damage, destruction, theft or the like to Participant's luggage or personal belongings, and that Participant has retained adequate insurance or has sufficient funds to replace such belongings and will hold FAMU harmless therefrom.

I also acknowledge and understand that in the event I become detached from The Trip group, fail to meet a departure bus, airplane, or train, or become sick or injured, I will bear all responsibility to seek out, contact, and reach The Trip group at its next available destination, and that I shall bear all cost attendant to seek out, contact and reach The Trip group at its next available destination.

I further acknowledge that the aforementioned is not inclusive of all possible risks associated with The Trip and in no way limits the extent or reach of this release and covenant not to sue. I further understand that participating in The Trip is an acceptance of risk of injury or death and property loss or damage.

Initial _____ CONTINUE WITH THE NEXT PAGE

MEDICAL CONSENT AND LIABILITY RELEASE

I understand and agree that FAMU does not have medical personnel available at the location of The Trip, during transportation, or anywhere in a foreign country.

I hereby grant permission for emergency medical service to be rendered as deemed necessary. I do hereby voluntarily consent and authorize FAMU, in the event of an accident, illness or injury to take whatever measures and actions considered necessary and warranted under the circumstances to protect, safeguard and minimize further injury to my health and safety. I understand that such actions may involve or require placement in a hospital or another medical facility for services and treatment. For these expenses I accept total responsibility. Any transportation expenses by any mode will be a debt and liability for which I accept total responsibility.

I hereby further declare, represent and agree, that in the event that FAMU has to exercise the above voluntarily given medical authorization and consent, that I hold harmless, release and forever discharge FAMU from any and all liability, damages, claims and demands whatsoever, including attorneys fees and court cost, which I or any heir or assigned will make.

I am aware of aware of my personal needs and hereby assure the University that I have consulted with a medical doctor, as I may have deemed necessary, with regard to any personal needs. Further, I am aware that the University cannot be responsible for attending to any medication needs of the undersigned.

Initial _____ CONTINUE WITH THE NEXT SECTION

FAMU'S RIGHTS AND POWERS

FAMU reserves the right and power to cancel without penalty the offering and conduct of The Trip and to withdraw any part of The Trip and to make any alterations, deletions, or modifications in the itinerary and /or The Trip as deemed necessary by FAMU.

Initial _____ CONTINUE WITH THE NEXT SECTION

RELEASE FROM LIABILITY, INDEMNIFICATION AGREEMENT AND COVENANT NOT TO SUE

Knowing the dangers, hazards, and risks of such activities, and in consideration of being permitted to participate in The Trip, I agree, to the fullest extent permitted by law, to **FOREVER RELEASE** and on behalf of myself, my spouse, heirs, representatives, executors, administrators and assigns, **HEREBY DO FOREVER RELEASE** FAMU from any cause of action, claims, or demands of any nature whatsoever, including but not limited to a claim of negligence which I or my spouse, heirs, representatives, executors, administrators and assigns may now have, or have in the future against FAMU on the account of personal injury, bodily injury, property damage, death, accident or loss of any kind, arising out of or in any way related to my participation in The Trip and/or the use of facilities, equipment, or services in association with The Trip howsoever the injury or loss is caused, whether by the negligence of FAMU or otherwise.

Knowing the dangers, hazards, and risks of such activities, and in consideration of being permitted to participate in The Trip, I **COVENANT NOT TO SUE** and agree to **INDEMNIFY AND HOLD HARMLESS** FAMU from any and all causes of action, claims, demands, losses or costs of any nature whatsoever arising out of or in any way relating to my participation in The Trip and my use of facilities, equipment, or services in connection with The Trip.

CONTINUE WITH THE NEXT PAGE

I hereby certify that I have full knowledge of the nature and extent of the risks inherent in The Trip and the use of facilities, equipment, or services in association with The Trip, and that I am voluntarily assuming all risks, whether known or unknown.

I understand that I will be solely responsible for any loss or damage, including death, which I sustain or cause, whether in whole or in part, while participating in The Trip and my use of facilities, equipment, or services in association with The Trip, and that by this agreement I am relieving FAMU of any and all liability for such loss, damage or death.

My signature indicates that I have read, understood, and freely signed this agreement. I further certify that I am at least eighteen (18) years of age and that I am otherwise legally competent to sign this agreement. I further understand that the terms of this agreement are legally binding and I certify that I am signing this agreement after having carefully read and understood the same, of my own free will and fully intending to be legally bound by the same. This agreement is made in full, adequate and complete consideration of my participation in The Trip.

This agreement shall be construed and enforced in accordance with the laws of the State of Florida, and I consent to the jurisdiction of said state. I expressly agree that this waiver and release is intended to be as broad and inclusive as permitted under the laws of the State of Florida, that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Initial _____

CONTINUE WITH THE SIGNATURE PAGE

Page 4 of 5

IMPORTANT - READ ENTIRE AGREEMENT BEFORE SIGNING

Participant name Printed:

Signature (if 18 years of age or older):

Date:

Address:

Telephone Number (s):

Pre-existing allergies, illness or injuries: _____

Print name of Parent / Guardian (if Participant is under 18 years of age or a dependent child):

Signature:

Date:

Address:

Telephone Number (s):

Emergency Contact Information For Participant

Name: _____

Address: _____

Telephone Number(s): _____

Participant and Parent signatures need not be notarized but must be witnessed.

Witness name Printed:

Signature of Witness:

Date:

Address:

Telephone Number (s):

****ORIGINAL DOCUMENT MUST BE KEPT IN THE OFFICE OF THE UNIT SPONSORING THE TRIP****