Students who wish to pursue study in countries on the warning list should make a request in writing and submit it to the Center for Global Health at least 4 months prior to the planned study. The request will be reviewed by a committee of faculty. Possible reasons for granting an exemption include: student will be pursuing a unique educational experience that cannot be gained elsewhere and that is directly related to their graduate studies or career plans; student is a citizen of the country in question; student has considerable experience in the country in question. If your elective is approved fill out the attached waiver and hand it in to the CGH office.

1. **Rationale for study abroad in a country on the US State Department Warning List:** Indicate why this is important, what educational goals will be met, and how these goals are unique and require study in the country in question.

2. **Safety precautions that you will take:** Indicate your support network and other resources you will use to maintain safety.

3. **Any other information that we might consider:**
Waiver for countries with US Department of State Travel Warning Issued

I understand and acknowledge that my participation in a study abroad program located in a country with an issued US Department of State Travel Warning is voluntary. Without reservation or limitation, I assume all risks associated with my participation in said program. I understand that there are always many unpredictable and serious risks associated with travel and study abroad, and that such risks are common in countries for which a Travel Warning has been issued. These risks can and do have many underpinnings, including but not limited to the following: travel to and from and within a particular state, country or region; foreign political, legal, military, social and economic conditions; different standards of civil defense procedures, design, safety and maintenance of buildings, public places and modes of transportation; local medical and emergency services; local weather and environmental conditions.

Given the range of risks generally associated with travel and study abroad, and the likelihood that some or all of these risks are pertinent to an academic program located in a country with a US Department of State Travel Warning, I hereby acknowledge that I assume all responsibility for my personal health, safety and welfare as a consequence of my voluntary participation in the program named below. I further acknowledge that no person at the UW-Madison has or can offer me any guarantees regarding my personal health, safety and welfare, and that I have not been provided with any assurances about local conditions in the country to which I will travel that I construe as such assurances.

_______________________________________    Date___________________________
Signature

______________________________
Print name

_______________________________________    Date___________________________
Signature

______________________________
Print name

Print name of program abroad for which you have been accepted and wish to participate

Document drafted: February 2005