

SWU Summer International Program Pledge

Please read ALL the statements below very carefully, then sign the form IF you agree.

I. Participation in SSIP

1. I am aware of the cost of the program, and I will be responsible for the charges set by the program.
2. I am physically and mentally in good condition to travel to and participate in a 3-week program in Japan.
3. I will provide information concerning my physical and mental health as requested by the program.
4. I will sign up for travel and health insurance for the duration of the program and share my insurance information with SWU.
5. I will make travel arrangements for my trip to Japan on my own responsibility.
6. I will submit all the required documents, make payments, and take care of other necessary preparations for participation in the program in a timely manner.
7. I will give permission to SWU to share my personal information with third parties to make necessary arrangements for the program, such as for making accommodation reservations, contacting my home university, and/or emergency contact(s) in case of emergency, etc.

II. Conditions

8. I understand SWU may cancel the program in the event which makes SWU unable to safely deliver the program, such as a natural disaster, deterioration of public order, pandemic, etc., and SWU will not be held responsible for the cancellation of the program due to the aforementioned reasons.
9. I will abide by Japanese laws and regulations and observe ALL rules defined by the program.
10. I understand SWU is not responsible for any of my actual or alleged violations of law/regulation, whether or not intentional, during the program.

III. Expectations

11. I understand that SSIP is an academic program with lecture series, readings, presentations, class discussions, and group projects for university credits. I am aware that participation in all lectures and activities, as well as submission of assignment(s), is required for completion of the program. I will fully commit to all the program activities and will work to the best of my ability to complete the program.
12. SSIP promotes and values cultural diversity. I will contribute to the program by actively interacting with both international and Japanese students with respect and by sharing my ideas and experiences with other participants.

If any clarifications or problems may arise with the said statement(s), I will contact the Center for International Exchange. ssipstaff@swu.ac.jp

PRINT NAME _____

HOME INSTITUTION: _____

X _____

SIGNATURE:

DATE (MM/DD/YYYY)