

## **AY2017 Ritsumeikan Asia Pacific University Off-campus Programs Requirements for Program Participation**

### **1. Required Attitude**

All participants in Ritsumeikan Asia Pacific University Off-campus Programs (hereinafter referred as to Program) must abide by the following conditions.

- (1) Participants must understand the aim and the purpose of their chosen program, and should actively participate in the program and take their studies seriously.
- (2) Participants must conduct themselves in a dignified and honorable manner while maintaining the good name of Ritsumeikan Asia Pacific University (Hereinafter referred to as “APU”) and the host institution (Hereinafter referred to as “Host Institution”).
- (3) Participants must act in accordance with the regulations of APU, the rules of the Host Institution, Japanese law and the laws and regulations of the host country or region for the full duration of the program. Participants are also expected to follow all instructions from staff and faculty at both APU and the Host Institution
- (4) Participants must not protest in the case that he or she was commanded to cancel his or her participation in a program or commanded to return to Japan due to breach of ‘Requirements for Program Participation’.

### **(2) Health Management**

- (1) Participants will be responsible for their own personal health.
- (2) Participants are required to purchase overseas health and travel insurance and JCSOS Risk Management System (J-TAS) before departure from the organization designated by APU (overseas programs only).
- (3) Participants must inform APU if they have any pre-existing medical conditions.
- (4) Participants must submit “Off-campus Program Participants Self-report of Health Condition and necessary support in studies”.
- (5) Should a participant require hospitalization or medical treatment, the student must immediately inform APU and the host institution and follow staff and faculty instructions. The participant will be responsible for any medical expenses above that which is covered by their insurance.
- (6) Should the participant require emergency medical treatment or surgery at a time when it is impossible to obtain their permission (or that of his/her guarantor’s), the participant agrees to be treated according to the judgment of the appropriate on-site supervisor of the Host Institution.

### **(3) Costs or Compensation**

- (1) Necessary costs related to the program (program fee, accommodation fee, transportation fee, insurance, etc.) must be paid within the designated time frame.
- (2) Should a participant withdraw from the program, or become unable to join or continue with the program owing to injury, disciplinary action, or any other reason, the participant alone will be responsible for all costs incurred, including any costs that APU is required to pay to the host institution.
- (3) In the event that the program is cancelled or changed as a result of natural disasters, accidents, strikes, infectious disease, political unrest, terrorism or other unforeseen circumstances, the participant will not seek compensation from either APU or the Host Institution. In this situation, as in term 3. (2), the participant will be responsible for all costs incurred.
- (4) Neither APU nor the Host Institution will be held financially or otherwise responsible for accidents, sickness, or death that occurs as a result of participant negligence which are beyond the control of either institution.
- (5) Participants will be responsible for any damage or theft of personal belongings, traffic accidents or criminal events that occur and are deemed to be beyond the control of both APU and the Host Institution.
- (6) Participants will be liable for compensation of any damages APU suffers as a result of their grave negligence or wrongful intention.
- (7) The parties involved with program administration such as APU, host universities and/or local institutions, do not represent or act as an agent for any accidents and damages brought by unlawful acts caused by third parties e.g. organizations, individuals, homestay families. Students are responsible for taking any legal action and other related matters. The parties involved with program administration such as APU, host universities and/or local institutions shall not be liable for these incidents.

### **4. Immigration and Departure (Overseas Programs Only)**

- (1) Participants must not enter the relevant country individually before the start of their program.
- (2) Participants must return to Japan without delay after the program finishes. Participants are not authorized to extend their stay in the host country.

### **5. Submission of Pledge**

Participants must agree and abide to all conditions listed above and submit the pledge which is signed by both the participant and his or her parent/guardian.

To be submitted to Academic Office  
Submission due: November 13<sup>th</sup> (Mon.), 2017 – 16:30

Shun Korenaga  
President  
Ritsumeikan Asia Pacific University

### PLEDGE

I acknowledge that I have read and understood the attached 'requirements for participation' with respect to the program listed below. Also I hereby pledge the following: I agree that the personal information I have provided in the application and other documents will be given to the host institution, travel agency, insurance company, embassy, consulate-general, Ministry of Foreign Affairs in Japan etc. as a part of the program enrollment procedures.

Date \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_  
Student Name \_\_\_\_\_ (inkan) \*Inkan is required regardless of your nationality.  
Program Name \_\_\_\_\_ (host institution: \_\_\_\_\_ )  
College of College \_\_\_\_\_ College of (APM / APS)  
Year \_\_\_\_\_ 1 / 2 / 3 / 4 / Other ( \_\_\_\_\_ )  
Student ID Number \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Along with the person named above, I, the guarantor, hereby pledge to abide by the terms in this document.

Date \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_  
Parent/Guardian Name \_\_\_\_\_ (inkan) \*Signature is accepted for non-Japanese nationals.  
Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Relationship with the student \_\_\_\_\_