



COLLEGE OF NURSING AND HEALTH PROFESSIONS SIMULATION, LAB, & CLINICAL PARTICIPATION WAIVER

To complete the necessary requirements to graduate from the University of Southern Indiana ("USI") with a degree from the College of Nursing and Health Professions, students must complete certain simulation(s), lab(s), and/or clinical(s) learning experiences as identified by the program faculty. It is important students understand postponing participation or failing to participate in these simulation(s), lab(s), and/or clinical(s) learning experiences may inhibit their ability to meet graduation requirements within their current academic timeline and may delay or prevent graduation.

While USI can provide students with accommodations under various laws to proceed academically, USI's Clinical Learning Policies do require students to abide by the policies and procedures of the clinical provider in which they have an on-site learning experience. Therefore, not abiding by the immunization policy or other professional policies of your on-site learning experience provider could result in your removal by the provider from their facility. USI does not have the authority to grant a waiver of clinical provider policies.

Students in programs within College of Nursing and Health Professions shall review and acknowledge the below affirmative statements before they may participate in any simulation, lab, or clinical learning experience.

1. I understand USI will provide me with the opportunity to participate in clinical learning experiences but may be unable to provide alternative site locations willing to accept requests for accommodations to waive their policies.
2. I acknowledge that all clinical learning experiences that are a required part of an academic program have been put in place to meet either state or national accreditation requirements. USI cannot waive these experiences if a student does not complete them due to removal by an on-site clinical experience provider.
3. I agree to follow instructions from my professor or on-site clinical supervisor regarding preventative measures, including any required PPE, immunization, or screening procedures to participate in any simulation(s), lab(s), and/or clinical(s) learning experiences. Failure to comply with these instructions prior to participation may result in me being ineligible and I will hinder my ability to complete the academic requirements.
4. I acknowledge that not completing academic requirements for clinical, fieldwork, or internship experiences could hinder my progression through a program and delay or prevent me from reaching graduation.
5. While USI may provide an accommodation allowing me to proceed with my academic studies, I acknowledge that not completing a clinical learning experience may prevent me from achieving my academic or career objectives and may result in expending time and financial resources on an incomplete course of study.
6. I agree to indemnify and hold harmless the University of Southern Indiana, its trustees, its agents, and its employees from all liabilities or charges for any damages, injuries, deaths, losses, or other claims related to or resulting from my participation or lack thereof.
7. I agree to provide this signed document to the chair of my program prior to participation.
8. I certify that I have read and signed this document with full knowledge of its significance.

Printed Name of Student

Student Signature

Date