UTHSC Student Volunteer Waiver

ACKNOWLEDGMENTS: I acknowledge that as a student enrolled at the University of Tennessee Health Science Center, I am voluntarily undertaking duties, assignments and responsibilities outside of the regular academic program, but only those UTHSC sponsored or sanctioned events, in response to the 2020 COVID-19 pandemic emergency. I understand that this is not an activity supervised by UTHSC staff or faculty. I also agree that any clinical or research activity must always remain under the instruction, control and direction of a faculty member of UTHSC, even if these duties are off-campus and outside of the traditional educational environment. I understand that I remain subject to the Code of Conduct of UTHSC as well as any policies of the host clinical site, if any. I understand that this is a volunteer activity and I will not be compensated for my services nor eligible for workers’ compensation.

WAIVER and RELEASE: I hereby waive and release UTHSC, as well as its faculty, staff and other students, from, and hold them harmless, as to any claims, causes of action, and or liability, related to my volunteer duties associated with COVID-19 response. This waiver and release includes any action or claim for any personal injury, property damage, or loss, including death, arising as result of any act or action by UTHSC or the result of the actions and/or conduct of any other person, or agency, whether caused by the negligence of UTHSC or otherwise. I assume any and all risks inherent as a healthcare provider during this COVID-19 emergency. I understand that UTHSC does not maintain an insurance policy covering any circumstance arising from my participation.

Nothing contained herein shall be deemed or construed to waive or abrogate in any way the sovereign immunity or statutory immunity of the State of Tennessee or UTHSC, or any official, officer, or employee of the State or UTHSC.

IN SIGNING THIS WAIVER AND RELEASE, I represent that I have read and agree to the foregoing acknowledgments, waiver and release of liability, understand it and sign it voluntarily as my own free act; no oral representations, statements or inducements have been made; I am at least eighteen (18) years of age and fully competent to sign.