

**Addendum to the Terms and Conditions of Participation  
Required to Study Abroad in Israel on a Drexel sponsored study abroad program.**

**I will be abroad during the following term(s)**

**Fall 20**\_\_\_\_\_

**Winter 20**\_\_\_\_\_

**Spring 20**\_\_\_\_\_

**Summer 20**\_\_\_\_\_

I hereby agree to supplement the terms and conditions of my Drexel Study Abroad as follows:

I acknowledge that I have been made aware of the risks of international travel and, more specifically, the risks of travel to Israel. I also acknowledge that I have read and understand the U.S. Department of State Travel Warning regarding travel to and in Israel by United States citizens dated June 20, 2005 and that, in spite of such warning and the University's strong recommendation against electing to study in Israel at this time, I have made the decision to travel to Israel for study abroad as a registered Drexel University student.

I acknowledge that I am voluntarily participating in a study abroad program at The Technion-- Israel Institute of Technology or Ben Gurion University (please circle appropriate institution). I also acknowledge that my participation in the program may expose me to significant risks, including, but not limited to, terrorism, war, serious bodily injury or death, property damage and other risks that may not be foreseeable. I understand that Drexel University is not responsible for my safety and I assume full responsibility for all risks associated with my participation in the program.

I know that I am not required to study in Israel to satisfy any Drexel requirement and I am aware of other options for study abroad. Further, I understand that, should I decide to leave the program before the end of my study abroad term(s) because of security concerns, there is no guarantee that I will receive credit or a refund of tuition or any other fees paid for study abroad.

By signing below, I confirm that I am at least 18 years of age or have obtained the written consent of my parent(s)/guardian(s).

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Name Printed

\_\_\_\_\_  
Witness of Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Witness Printed