

Penn
EngineeringLaboratory or Department Unpaid Student
Business Offices, School of Engineering and Applied Science,
University of Pennsylvania

PARENTAL CONSENT STATEMENT & INSURANCE DOCUMENTATION FORM

(Required when student is a Minor)

s follows:	of Print Minor's Full First and Last Name	, I understand and consent
1. My child has been offered an unp laboratory:	baid position with Penn Engineering for educa	
	sor:	
Name of Head of Laboratory/Superv	/isor:	
	To:Date	
	specialized environments in which chemical potential for creating hazardous conditions. I a n a Penn Engineering laboratory.	
physicians, members of the faculty,	ccurring during my child's experience, I grant , agents and employees to provide such emergable. I agree to cover the cost of such emerger	gency care and treatment as in their judgmen
4. I accept responsibility for provid	ing any treatment or care my child might requ	ire beyond emergency treatment.
Name of Parent/Guardian: (Please	print full name)	
Signed:		
Date:		
Medical Emergency Contact Info	rmation	
Person to contact first:	Person to contact second:	Person to contact third:
Name:	Name:	Name:
Relationship:	Relationship:	Relationship:
Day Tel:	Day Tel:	Day Tel:
	Mobile:	Mobile:
Mobile:		
Mobile:	Eve Tel:	Eve Tel:



Laboratory or Department Unpaid Student Business Offices, School of Engineering and Applied Science, University of Pennsylvania

BEHAVIORAL AGREEMENT

Name of Student:
Department:
Laboratory Name:
Name of Head of Laboratory/Supervisor:
Responsible Faculty Advisor:
In recognizing that the success of this experience depends on cooperation and commitment to the highest standards of conduct, you are hereby asked to agree to the following:
 Abide fully by the University of Pennsylvania's Code of Conduct and Code of Academic Integrity, Penn Engineering's Code of Ethics, and abide by all laws and other relevant legal conditions surrounding the program. These articles may be found at: Penn Code of Conduct: http://www.upenn.edu/osl/conduct.html Penn Code of Academic Integrity: http://www.upenn.edu/osl/acadint.html. Penn Engineering Code of Ethics: http://www.seas.upenn.edu/ugrad/ethicscode.html
 Conduct yourself in accordance to the highest personal standards of character and integrity and not engage in any behavior that is deemed as inappropriate or unacceptable by the Head of Laboratory/Supervisor, Responsible Faculty Advisor or an authority of the School of Engineering or University of Pennsylvania.
 Actively engage in the practice of good personal safety behaviors.
If, in the opinion of the Head of Laboratory/Supervisor, Responsible Faculty Advisor or an authorized officer of the School, you are found to be in non-compliance of this agreement, the experience may be terminated immediately.

Signature of Student	Date	
(If Student is under 18 years)		
Print Full Name of Parent/Guardian:		
Signature of Parent/Guardian (Required if Student is under 18 years)	Date	
Signature of Head of Laboratory/Supervisor	Date	
Signature of field of Laboratory/Supervisor	Date	
Signature of Responsible Faculty Advisor	Date	
To the Student: Please return completed form to Head of Laboratory identified	ed above.	
To the Head of Laboratory/Supervisor: Please send completed form to SE records.	AS, HR. Keep a copy for your	