**Institute for Global Leadership Research Abroad Contract**

*Please read this document thoroughly and e-mail* [*heather.barry@tufts.edu*](mailto:Patricia.Letayf@tufts.edu) *with any questions.*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree that as conditions of my IGL Research Abroad:

NAME

• I will get all recommended vaccines

• I will check in every **2** days with the IGL office , either by phone or email

• I will not put myself, or partner(s) if applicable, in dangerous or reckless situations and

will keep attuned to the local media and events

• I will not get involved in political activities of any kind

• I will leave \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ immediately should the situation become dangerous or should the IGL office ask me to leave due to the situation on the ground

• I will provide the agreed-upon follow-up information (eg. research paper, policy recommendations, photo essays, etc.) by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE

• I will present orally or visually, via a poster board or slide show, video or the like, in the undergraduate research symposium in spring semester

• I will document my work through photographs, video and/or audio recording and work with the Multimedia Coordinator to create a short presentation piece for the website

• I will at all times identify my work as sponsored and supported by the IGL and use the IGL logo on all materials

• I will send a letter of appreciation to the research sponsor within one month of my return

By signing this contract, I am agreeing to the above provisions. I understand that failure to abide by these requirements ethically binds me to return the funds expended by the Institute for Global Leadership in support of my research and will preclude me from participating in any other Institute activities and from receiving Institutional support.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE DATE

Cell phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent e-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_