## 

***Indigenous Summer Enhancement Program in Public Health and Health Research 2019***

*Diné College*

## Guardian/Parent Acknowledgment Form

I, , having read the

(*Print parent/guardian name)*

Indigenous Summer Enhancement Program application and information with my son/daughter, give permission for

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*(Print student’s name)*

to participate in the 2018 Indigenous Summer Enhancement Program.

##### Release of Liability:

I give full consent for my son/daughter to participate in the 2019 Indigenous Summer Enhancement Program (ISEP) and related activities sponsored by Diné College and Northern Arizona University. I further release Diné College and Northern Arizona University and any of its affiliates for the ISEP Program from any liability of accidents or injuries that may result as a part of the program’s activities/events. Furthermore, should any disciplinary issues arise during the length of the program, I will take full responsibility for my child’s actions and understand that it is the right of the ISEP program to release my child from the program for any reason deemed necessary. (i.e., discipline, non-compliance with policies & procedures, failure to complete assigned tasks, and excessive tardiness/absenteeism.)

I will support my child in all components and requirements of the ISEP Program. I will encourage their full participation in all ISEP activities, including those listed below:

* Parent & Student Orientation, TBA
* Attend full program, June 2nd – June 7th, 2019 (1 week in Tsaile, AZ)

Parent/Guardian Signature Date