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Withdrawal and Refund Policy

Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

Withdrawal Process

To withdraw from the program, our office must receive a written statement of withdrawal from the student's parent or guardian. This notice should be emailed to ei@jhu.edu.

Refund Policy

- Refunds will be issued according to the refund schedule provided in the chart below.
- No refunds will be granted to students suspended or dismissed for disciplinary reasons.
- The Engineering Innovation program reserves the right to dismiss students for violations of university and/or program policies.
- To pay your student account balance please follow the instructions in the application portal.
- Commuter Lunch Fees are non-refundable.

Time of Withdrawal	Refund Schedule
May 12	90% refund of tuition minus any scholarship award No refund of commuter lunch fees
June 12	75% refund of tuition minus any scholarship award No refund of commuter lunch fees
July 7	50% refund of tuition minus any scholarship award No refund of commuter lunch fees
After July 7	No refund

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name: _____

Parent/Guardian Name _____

Parent/Guardian Signature _____

Relationship to student _____

Date: _____

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Waiver and Release

Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

Release

I give permission for photographs and video footage of my child to be used in publications (catalogs, brochures, reports, etc.), multimedia displays (slideshows, photo collages, web pages, etc.) for the purpose of promoting the Explore Engineering Innovation program and other promotional projects.

Waiver

I understand that JHU assumes no liability for injury or damages arising from the result of participation unless due to willful fault or gross negligence on the part of the University and I agree to indemnify and defend JHU for damages resulting from my child's actions.

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned and emailed signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Parent/Guardian Name

Parent/Guardian Signature

Date

Relationship to student

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Student Expectation Agreement

Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

Students are expected to obey the following rules and policies while participating in Explore Engineering Innovation. I understand that failure to obey the rules and policies stated below may lead to dismissal from the Program. I understand this is a non-exhaustive list of possible reasons for dismissal.

General Expectations

Students are expected to:

1. attend all required in-person and virtual class sessions.
2. take responsibility for their own work and actions.
3. strive to do the best work possible.
4. adhere to the highest standard of academic honesty.
5. be punctual, courteous, and neat.
6. respect the ideas and property of others.
7. cooperate with Johns Hopkins program staff supervision.
8. be respectful of all races, cultures, religions, genders, gender identities or expressions, ages, sexual orientations, abilities, and national origins.
9. treat the Program staff, students, visitors, employees of the Program site and other participants with mutual courtesy and respect.
10. wear clothing appropriate for all activities as outlined in the course syllabus and lab handouts, which may include closed toe shoes, a lab coat, a long-sleeved shirt, long pants, face mask and/or goggles.
11. stay within the designated physical areas (e.g. classrooms, labs, etc.) when participating in-person and when participating online, stay within the designated areas of online platforms (e.g. Canvas, Microsoft Teams, Zoom, etc.).
12. follow the rules and policies of the Johns Hopkins University including the following:
 - a. The [JHU Anti-Harassment Policy](#)
 - b. The [JHU Policy against Sexual Misconduct](#)

Students are prohibited from:

1. undermining the safety or well-being of themselves or others.
2. engaging in any physical or emotional abuse of any person or any action that threatens physical or emotional harm or endangers the physical or emotional well-being, health, or safety of any person.
3. engaging in bullying, hazing, or harassing behavior, including stalking, threatening, or defaming others.
4. stealing or vandalizing property or engaging in any other illegal conduct.
5. possessing or using tobacco, e-cigarettes, alcohol, drugs, illegal substances, or related paraphernalia.
6. possessing, using, storing, transporting, selling, distributing, manufacturing, or transferring any weapons (including without limitation guns, firearms, shotguns, rifles, air rifles, paintball and pellet guns, BB guns, Tasers, and knives), chemicals, or explosives (including without limitation fireworks).
7. participating in conduct that disrupts or interferes with the orderly functioning of the University, the performance of the duties of University personnel or the University business or activities, including without limitation studying, teaching, research, administration.

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Please note, when participating in online portions of the course, students may be sent to break out rooms where they will work with other students in the course. Instructors, Teaching Fellows, and Teaching Assistants will be dropping in regularly to monitor these breakout rooms, to answer student questions, and to check on student progress.

Students should understand that they may need to work collaboratively with other student(s) outside of the established course hours. Students are expected to adhere to the Student Expectation Agreement during these non-class time meetings.

Communication and Netiquette Expectations

Netiquette refers to rules for respectful online behavior and communication. I will adhere to the Communication and Netiquette Rules as outlined below and will report violations of these rules to the instructor or other program staff.

Students are expected to:

1. be respectful, to read and listen to classmates' posts and respond thoughtfully. Treat everyone in the program community with respect.
2. communicate clearly. Check spelling, grammar, and punctuation for best readability for others. Do not use all caps, texting, or instant messaging shortcuts.
3. be kind. Be positive and kind in your discussion posts and other communications. Be careful with the tone of your speaking and writing; it's harder for others to recognize your emotions when they can't see and hear you. Reread your posts before sending to make sure they clearly communicate your ideas in a scholarly way.
4. support a safe space. Your classroom is a place of learning and growing. Stay on topic in discussions, use course information to support your arguments. Don't judge others; you can disagree respectfully. Tell your instructor if you feel bullied or unsafe in this course. Do not send or forward inappropriate messages, photographs, or images.
5. protect privacy. Protect your privacy and the privacy of your instructor and classmates. Do not share classmates' posts or links to workspaces with others. Do not share personal information about you or your family with others.
6. adhere to the Student Expectation Agreement during any non-class time meetings with their peers. There may be times when students will need to work collaboratively with other students outside of the established course hours.
7. adhere to the Student Expectation Agreement while working with peers in a virtual breakout room. When participating in online portions of the course, students may be sent to break out rooms where they will work with other students in the course. Instructors, Teaching Fellows, and Teaching Assistants will be dropping in regularly to monitor these breakout rooms, to answer student questions, and to check on student progress.

Students are prohibited from:

1. sending inappropriate or pornographic messages or images.
2. making, attempting to make, sharing, or distributing an audio or visual recording or photograph of any person(s) without the knowledge and consent of all such persons.

Health and COVID Expectations

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1. Students will follow the current JHU COVID-19 Protocols which are found on the JHU website – <https://covidinfo.jhu.edu/>.
2. If a student has symptoms of COVID-19 they will self-isolate, take a COVID-19 test, and remain isolated until receiving the results.
3. If a student tests positive for infection with SARS-CoV-2 they will self-isolate and notify the Johns Hopkins Student Health and Wellness Center.
 - a. If a residential student tests positive for SARS-CoV-2, a responsible adult will arrive within 24 hours of a positive test to remove them from the residence hall. The student will only return to class (and residence hall) after being cleared to return by the Student Health and Wellness Center.
 - b. If a commuting student tests positive for SARS=CoV-2, they will isolate at home and only return to class after being cleared to return by the Student Health and Wellness Center.

Commuting Student Expectations

All commuting students are expected to:

1. reside with a responsible adult over the age of 25 while participating in the program.
2. provide their own transportation to and from the program.

Signature

I hereby approve _____ (student name)'s participation in the educational program above. To the best of my knowledge, there are no behavioral or other conditions that will interfere with my student's appropriate participation. If my student needs accommodation for disabilities, I shall make the requests as soon as possible, but no later than two weeks prior to the first day of class.

By signing I affirm that I have reviewed this form with my student.

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such and that my student's violation of this policy could result in removal from the program.

Student Name

Parent/Guardian Name

Parent/Guardian Signature

Date

Relationship to student

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Procedures for Dealing with Issues of Academic Misconduct Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

I. What this Policy Covers

Students enrolled in the Program assume a duty to conduct themselves in a manner appropriate to the Johns Hopkins University's mission as an institution of higher learning. Students are obligated to refrain from acts which violate the academic integrity of the University. Violations of academic ethics include, but are not limited to: cheating, plagiarism, submitting the same or substantially similar work to satisfy the requirements of more than one course without permission, submitting as one's own the same or substantially similar work of another, knowingly furnishing false information to any agent of the University for inclusion in academic record, falsification, forgery, alteration, destruction or misuse of official University documents or seal. The full Academic Misconduct Policy for Whiting School of Engineering Pre-College Programs may be found on the policies and services page of our [website](#).

II. Procedures for Dealing with Cases of Academic Misconduct

If a student is suspected of a possible violation of academic ethics, the instructor in charge of the course shall review the evidence and the facts of the case. If the instructor believes that a violation of academic ethics has occurred, the instructor will report the case to the Assistant Dean of Pre-Collegiate Programs. If the violation is a first-time offense, and the instructor feels that the violation does not warrant failure of the course or a more severe penalty, and both parties agree on the proposed resolution, the case may be resolved between the instructor and student. If such an agreement is reached, the faculty member must promptly provide the student with a resolution agreement form outlining the resolution that includes the charges, a summary of the information, the findings, and the sanctions agreed upon. A student has two (2) business days from the date of receipt to sign the resolution agreement form. Once a student signs an agreement with the faculty member or instructor of record, there are no further avenues for appeal.

If the violation is a first-time offense, and the instructor feels that the violation does not warrant failure of the course or a more severe penalty, and both parties agree on the proposed resolution, the case may be resolved between the instructor and student. If it is not a first offense; or the student and instructor do not agree on the alleged misconduct and resolution; or if the instructor feels that the violation warrants failure of the course or a more severe penalty; the case will be sent to the Assistant Dean of Pre-Collegiate Programs who will gather information and determine if there is sufficient information to move the case to a hearing process.

If the case goes to a hearing, the Assistant Dean of Pre-Collegiate Programs will convene an ad hoc committee of three current or recent instructors, teaching fellows or teaching assistants from a Whiting School of Engineering Pre-Collegiate Program. This committee will meet with the student, instructor, and any witnesses to review the allegations and evidence with the student and give the student an opportunity to respond. Following the hearing the student will be notified of the findings, determination of responsibility, and any sanctions. The student will have five (5) business days to file an appeal to the Associate Vice Dean for Graduate Education and Lifelong Learning. The appeal should outline the offense and reasons that the penalty is not just. The appeal should be addressed to the Associate Vice Dean for Graduate Education and Lifelong Learning who will make a final decision based on the appeal.

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III. Potential Penalties (not an exhaustive list)

1. Formal Warning – The student is notified in writing that their actions constitute a violation of this policy, and may be subject to other actions (e.g., re-taking an exam or failure in a course).
2. Retake of the examination, paper or exercise involved.
3. Score of zero on the examination, paper or exercise involved.
4. Lowering of the course grade.
5. Failure of the course.
6. Failure of the course with a notation on the transcript that the grade was for a violation of academic ethics.
7. Removal from the program with no refund.

Signature

By signing I affirm that I have reviewed this form with _____(student).

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Parent/Guardian Name

Parent/Guardian Signature

Date

Relationship to student

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Insurance Coverage

Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

Students must have valid health insurance, issued by a provider headquartered in the United States, to participate in Engineering Innovation. Traveler’s insurance does not meet this requirement. A parent or guardian may not waive or permit students to attend without health insurance that is U.S.-based. International students must also meet this U.S.-based health insurance requirement.

For International students who cannot document satisfactory coverage, a temporary plan is provided through IMGglobal. This is a limited, emergency plan and does not cover pre-existing conditions. Please visit the Policies & Services page of our website for more information.

All students must upload a copy of their health insurance card or documentation of coverage to their online application portal before they will be permitted to participate in the Program.

I certify that my student has a health insurance plan or I will purchase a health insurance plan with coverage comparable to JHU insurance coverage and understand that I will be responsible for any medical expenses that my student may incur while participating in Explore Engineering Innovation Summer 2023 Program.

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Parent/Guardian Name

Relationship to student

Parent/Guardian Signature

Date

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Authorization for Treatment and Release of Medical Information Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

Most states require that surgical and medical treatment of minors (individuals less than 18 years of age) be at the request of and with the approval of their parents (and spouse of a married minor). The right to request and approve medical treatment of a minor may be delegated to officials of Johns Hopkins University (“University”) or its contractors or agents. It is the University’s practice to notify parents as soon as possible in the event of a major illness or injury. It may be impractical for the University to notify parents for every minor illness or injury requiring treatment. Therefore, the University asks that parents delegate to the University the right to request and approve medical treatment for their children when, in the University’s discretion, it’s impracticable to get parental consent.

Additionally, parents of minors (and spouse of a married minor) must approve the release of medical information regarding their child. However, please note that your child’s medical information may be disclosed by your child, or at the request of your child, for ordinary medical and insurance purposes.

Authorization for Treatment and Release of Medical Information

Johns Hopkins University, or any contractor or agent of Johns Hopkins University, is hereby authorized to consent to medical treatment and/or any operative and surgical procedure under any anesthetic, either local or general, for my child while enrolled in a Johns Hopkins University program, as may be considered necessary or advisable by the medical staff performing such treatment or surgery, and/or to release to medical staff who may provide treatment to my child, relevant medical information for treatment purposes, in the event neither parent or guardian who has signed below is readily available to consent to such treatment and/or request for medical information.

By typing my full name below and submitting it as my electronic signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Parent/Guardian Name

Relationship to student

Parent/Guardian Signature

Date

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Climbing Wall Release Form

Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

I want to use the climbing wall/bouldering cave located in the Recreation Center. I acknowledge that using the climbing wall/bouldering cave and participating in the activities sponsored by the Office of Recreation will require some skill, training and equipment for which I am solely responsible, and I know that all types of bodily injury and disability are a risk to participating in these activities. I know that the Johns Hopkins University assumes no responsibility or liability for my participation at the climbing wall/bouldering cave, and I agree to assume all the risks of participating in the activities at the climbing wall/bouldering cave. Further, use of the equipment available for check out is at my own risk. I accept my responsibility for my own physical condition and conditioning. I know I am responsible for any medical expenses incurred by me as a result of participating in the activities at the climbing wall/bouldering cave.

In consideration for the Office of Recreation permitting me to use the climbing wall/bouldering cave, I agree to release the Johns Hopkins University, its officers, agents and employees from any and all liability or causes of action whatsoever arising out of any damage, loss, injury or death as a result of my use of the climbing wall/bouldering cave whether such damage, loss, injury or death results from the negligence of the University or its officers, agents or employees, or some other cause, and agree to indemnify and hold harmless the University and its officers, agents and employees from any such liability, claims, demands or causes of action.

This Agreement shall be governed by the laws of the State of Maryland without giving effect to any choice or conflict of law principles of any jurisdiction. This Agreement shall be construed as if drafted jointly by the parties and no presumption or burden of proof shall arise favoring or disfavoring any party by virtue of the authorship of any provision in this Agreement.

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Parent/Guardian Name

Relationship to student

Parent/Guardian Signature

Date

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Emergency Contact Information

Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

If a student tests positive for Covid-19, a parent or guardian will be notified immediately, and the student will be moved into isolation. If a student becomes ill, is dismissed from class, or needs to otherwise be picked up from the course, a parent or guardian will be notified immediately.

If the student is a commuting student, a parent or guardian will be asked to pick their student up from the program as soon as possible but before the end of class at 3pm.

If the student is a residential student, a parent or guardian will be asked to pick their student up from the program as soon as possible but in no more than twenty-four (24) hours after being notified.

If a parent or guardian is not available, we will use the emergency contact designated here. Any costs associated with health care, travel, meals, accommodation, or anything additionally related to isolation or immediate pickup, are to be covered by the family.

Please provide up-to-date contact information for the students' parents/guardians.

Parent/Guardian 1

First Name _____ Last Name _____ *

Email _____ Home Phone _____

Cell Phone _____ Work Phone _____

Street Address _____ *

Street Address _____

City _____ State/Province _____

Zip/Postal _____ Country _____

Parent/Guardian 2

First Name _____ Last Name _____ *

Email _____ Home Phone _____

Cell Phone _____ Work Phone _____

Street Address _____ *

Street Address _____

City _____ State/Province _____

Zip/Postal _____ Country _____

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Emergency Contact - Required

Please provide information for a responsible adult over the age of 25. If parents/guardians are not available to pick up the student in case of illness, positive COVID test result, dismissal from course, or similar situation, one of the individuals listed below will be asked to retrieve the student in a timely manner from the program.

First Name _____ Last Name _____ *

Email _____ Home Phone _____

Cell Phone _____ Work Phone _____

Street Address _____ *

Street Address _____

City _____ State/Province _____

Zip/Postal _____

Country _____

Second Emergency Contact - Required

First Name _____ Last Name _____ *

Email _____ Home Phone _____

Cell Phone _____ Work Phone _____

Street Address _____ *

Street Address _____

City _____ State/Province _____

Zip/Postal _____

Country _____

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Authorization to Disclose Pandemic-Related Health Status Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023

Institutes of higher education have developed and implemented systems, in collaboration with federal, state, and local governments to prevent SARS-CoV-2 transmission. In order to make timely decisions to support the health and safety of all students, faculty, and staff and to promote health equity, it sometimes becomes necessary to share and to provide certain COVID-19-related information internally to federal, state, and local departments of health. In addition, colleges and universities may disclose COVID-19 vaccination status to other school officials, such as instructors teaching a course in which a student has tested positive and likely exposed others in the class, on a need-to-know basis. These disclosures are permitted under FERPA on a need-to-know basis due because of the public health crisis and/or emergency posed by the pandemic.

Given the nature of the program, where the JHU program is being conducted at a host institution in another state and local jurisdiction, which has its own systems to prevent SARS-CoV-2 transmission as well as regulatory requirements for disclosure, it therefore may be necessary to disclose COVID-19 vaccination status and/or test results to appropriate school officials at the host institution in order for the host institution to meet its own internal and external requirements.

I, hereby agree to immediately disclose my vaccination status and/or any positive test results for the SARS-CoV-2 virus (COVID-19) that I receive for myself to Johns Hopkins University or the host institution where I am participating in the program. I acknowledge and agree that Johns Hopkins University may disclose my COVID-19 vaccination status, test results and associated information to authorized school officials at the host institution where I am attending as well as to appropriate federal, state, county, or other governmental and regulatory entities as may be permitted or required by law. I also acknowledge and agree that the host institution where I am attending may disclose my COVID-19 vaccination status, test results and associated information to Johns Hopkins University as well as to appropriate county, state, or other governmental and regulatory entities as may be permitted or required by law. I hereby release, discharge and hold harmless, JHU and host institution, including, without limitation, any its respective officers, directors, employees, representatives and agents from any and all claims, liability, and damages, of whatever kind or nature, arising out of or in connection with any act or omission relating to my COVID-19 diagnostic test, vaccination status and/or the disclosure of my COVID-19 test results.

By signing I affirm that I have reviewed this form with _____(student).

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name

Parent/Guardian Name

Relationship to student

Parent/Guardian Signature

Date

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FERPA Recording of Virtual Class Sessions

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The purpose of this form is to obtain consent from each student so that virtual class sessions may be recorded and posted to the section’s Learning Management System (LMS) for students to access while enrolled in the course.

In connection with my student’s participation in the Program:

1. I understand that class sessions where students are meeting with the Instructors, Teaching Fellows, or Teaching Assistants may be audio and/or video recorded. The audio/video recordings may also include complementary files such as transcripts and chat logs, and projects. Classes may be recorded from time to time, e.g., when another student is absent and has requested the class be recorded, or if the instructor deems that particular, class or instructor-led study session needs to be referenced regularly after the initial introduction of the content. Like other course content created as part of university activities, these recordings are subject to the Johns Hopkins Intellectual Property Policy. Recordings will be treated as subject to the Family Educational and Privacy Act (“FERPA”) – the federal student privacy law – and the Johns Hopkins University FERPA Policy if students are personally identifiable in the recordings.
2. I have no objection to Johns Hopkins University (“JHU” or “the University”), on behalf of the Whiting School for Engineering (“WSE”), using my voice or likeness for educational purposes, and I hereby permit JHU to release the education records that consists of recordings of my voice or likeness as I participate in the class (such as when I am making presentations or asking questions in the class) and/or depictions in the recordings of presentation slides or other materials I have created for the class. This information may be released and viewed by other students in the class or Instructors, Teaching Fellows, Teaching Assistants, or Program Managers. I am allowing this release of my student’s education records for educational purposes and to allow JHU to further the education of WSE students. I also understand that my student is prohibited from further disseminating the recording or from taking screenshots or recordings of the recording.

There is no time limit on the validity of this consent and release. I understand my agreement is voluntary and is not a condition or requirement of my participation in the class or my attendance at JHU.

Consent *

- Yes, I consent to the above release of information.
- No, I do not consent to the above release of information.

Student Name

Parent/Guardian Name

Relationship to student

Parent/Guardian Signature

Date

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FERPA Release of Information to Parent/Guardian
Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023
To be completed by student

Under the Family Educational Rights and Privacy Act (FERPA), most information about you from Johns Hopkins University records, including grades, is considered confidential and, with certain exceptions, generally may not be released to third parties, including your parent(s) or guardian(s), without your written consent.

You may authorize Johns Hopkins University to release information from your records to your parent(s), guardian(s). Please note that without this authorization, JHU's ability to disclose information from your records to your parent(s) or guardian(s), or to speak to your parent(s) or guardian(s) about information from your records will be significantly restricted. You are urged to inform your parent(s) or guardian(s) of this fact if you decide not to execute the authorization form.

I authorize Johns Hopkins University to disclose grade and attendance records to my Parents/Legal Guardians as listed below. This consent will remain in effect while I am enrolled in an Engineering Innovation Course unless withdrawn by me in writing by sending an email to ei@jhu.edu.

You may release information to my parent(s) and/or guardian(s) as listed below:

Parent/Guardian 1

First Name _____ Last Name _____ *

Email _____ Phone _____

Relationship to student _____

Parent/Guardian 2

First Name _____ Last Name _____ *

Email _____ Phone _____

Relationship to student _____

Checkbox

Check this box if you do not want to release information to your parent(s) or guardian(s)

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name _____

Student Signature _____

Date _____ *

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FERPA Release of Information to Non-Parent/Legal Guardian
Explore Engineering Innovation – Commuter – JHU Homewood Campus 2023
To be completed by student

Under the Family Educational Rights and Privacy Act (FERPA), most information about you from Johns Hopkins University records, including grades, is considered confidential and, with certain exceptions, generally may not be released to third parties, including your parent(s) or legal guardian(s), without your written consent. You may authorize Johns Hopkins University to release information from your records to someone other than your parent(s), legal guardian(s), such as a guidance counselor or community-based organization. You are urged to inform your parent(s) or guardian(s) if you decide to execute this authorization form.

I authorize Johns Hopkins University to disclose grade and attendance records to the person(s) as listed below. Please include the name(s), relationship(s), email address(es), and phone number(s) for anyone else to whom information can be released in the space below. This consent will remain in effect while I am enrolled in an Engineering Innovation Course unless withdrawn by me in writing by sending an email to ei@jhu.edu.

Please include the name(s), relationships(s), email address(es) and phone number(s) for anyone else to whom information can be released below:

Person 1

First Name _____ Last Name _____ *

Email _____ Phone _____

Relationship to student _____

Person 2

First Name _____ Last Name _____ *

Email _____ Phone _____

Relationship to student _____

Person 3

First Name _____ Last Name _____ *

Email _____ Phone _____

Relationship to student _____

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Person 4

First Name _____ Last Name _____ *

Email _____ Phone _____

Relationship to student _____

Checkbox

Check this box if you do not want to release information to your parent(s) or guardian(s)

By typing or signing my full name below and submitting it as my electronic or scanned signature, I acknowledge that I have read and understood the terms above, and that I intend to be bound by my signature. I understand and agree that my electronic or scanned signature below has the same legal validity and effect as a manual signature and that Johns Hopkins University may rely on it as such.

Student Name _____

Student Signature _____

Date _____ *