

Name _____
First Mid Initial Last

Mailing Address
Street _____

City, State, Postal Code _____

Country _____ Phone (_____) (_____) _____
int'l code area code number

Citizenship (country) _____ Place of Birth _____

Passport or Cedula # _____ (Or indicate that it has been applied for.)

Email _____

Permanent Address
Street _____

City, State, Zip _____

Country _____ Phone (_____) (_____) _____
int'l code area code number

Email _____

Personal Data
Date of Birth (MMDDYYYY) _____ Height _____ Weight _____

Sex: Male _____ Female _____ Marital Status: Single _____ Married _____ Age _____

Medical History
Do you have any physical handicaps? no ____ yes ____ If yes, please describe _____

Please provide detail on any serious allergy, medical or dietary condition _____

Education
University or College _____

Freshman _____ Sophomore _____ Junior _____ Senior _____ Post Bach _____ Other _____

Graduate Student _____ Department _____

(If "Other", please explain _____)

Parent, Guardian or Emergency contact.
Name _____ Phone _____ (_____) _____

Address _____

Physician
Name _____ Phone _____ (_____) _____

Medical Insurance Provider _____

Insurance card no. _____ Phone _____ (_____) _____

Phone _____ (_____) _____

Swimming Proficiency: Advanced Moderate Beginner Cannot Swim

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I have read and understood the ITEC information packet, its descriptions, processes and policies and certify that all the information I have provided to ITEC is correct and accurate to the best of my knowledge.

Applicant's Signature _____ Date _____

MARRIED PARTICIPANTS IN ITEC PROGRAMS

All participants who are married must have the following provisions signed by their spouse.

AS A SPOUSE of _____ I have read each and every word of this Agreement and I fully understand what is contained there in. In exchange for permission for my spouse to participate in the Programs, I voluntarily sign this Release and Indemnity Agreement. By signing, I agree to release and discharge the Releasees from any and all claims I may have, including any claims for loss or deprivation of my spouse's services, support, sexual relations, comfort, or attention that I may suffer as a result of, arising out of, or in connection with any of the events, conditions, or risks stated in the Agreement, even if such loss, liability, damage, or costs is based on the negligence of the Releasees.

Name of Participant (Please print) Telephone _____ (_____) _____

Address Education Conservation Research Assistant
Name of Program (check)

SIGNATURE _____ Date _____
THIS IS A RELEASE AND INDEMNITY AGREEMENT

CERTIFICATE OF INSURANCE COVERAGE

My insurance carrier has certified to me that my health and major medical insurance which is currently in force, provides valid coverage for me while engaged in an education program in a foreign country. Policy information is given below:

Name of Insurer _____ Policy No. _____

Address _____

Phone _____ (_____) Valid through (date) _____

I Further understand that I am responsible for providing my coverage for health, accident, major medical and hospital insurance during the period that I will be a participant in an ITEC program.

Name (Please Print) _____

Name of Program: ITEC Education Internship Research Assistantship

ALL PARTICIPANTS IN ITEC PROGRAMS MUST BE INSURED.

Please contact your health insurance carrier to determine whether your coverage extends to your stay in Panama. If it does not, you must secure student travelers' insurance, or some other kind of health insurance that will pay any medical expenses you may incur while at the Bocas del Toro Biological Station. Excellent medical facilities are readily available, but they do require proof of insurance for admittance, the same as hospitals in the U.S.

ITEC RELEASE AND INDEMNITY AGREEMENT FORM

I, the undersigned, desire to participate in the **Education Program** or the **Conservation Program** (both being covered in this agreement under the term "Programs") offered by the Institute for Tropical Ecology and Conservation (ITEC) and taking place at or near the Bocas del Toro Biological Station, Bocas del Toro Province, Republic of Panama, Central America. I understand that ITEC will not allow me to participate in these Programs unless I also enter into the Agreement. Therefore, in exchange for permission to participate, I make the following representations and agreements which I understand that ITEC is relying on:

1. I am of sound mind, in good health, and possess no physical or mental conditions that would hinder or prevent me from participating in the Programs.

2. I am eighteen years of age or older.

3. The term "releasees" as used in this Agreement shall mean ITEC, and their members, employees and agents utilized in connection with the Programs.

4. No one associated with the Releasees or with the Programs has made any representation or promise to me about the matters covered in the Agreement, apart from what is written in this agreement. In other words, this document contains the entire agreement between the Releasees and me with respect to the matters covered by the Agreement, and I understand that the terms of this Agreement are contractual ones that are legally binding on me.

5. I understand that this Agreement is binding not only on the Releasees and me, but also on our respective representative heirs, estates, beneficiaries, successors, and assigns.

RELEASE & INDEMNITY PROVISIONS FOR BENEFIT OF RELEASEES

In order to receive permission from the Releasees to participate in the Programs, I further agree as follows:

I understand that travel, foreign travel, and staying in a foreign country involves risks and can be dangerous. By my participation in the Programs, I voluntarily expose myself to these risks and dangers, whether expected or unexpected. I am aware of these risks and dangers and I am aware that I may obtain appropriate insurance coverage at my own expense.

On my own behalf and on behalf of anyone who, as a result of my participation in the Programs, can make a claim on my behalf or because of me, I agree as follows:

I release and discharge the Releasees from any and all liability and responsibility for any loss, damage, or injury of any kind that I may suffer as a result of or in connection with my participation in the Programs. This release covers any loss, damage, or injury caused by:

1. any criminal, illegal or unauthorized acts of third parties, including but not limited to any terrorist act, hijacking or sabotage;
2. any social or labor unrest;
3. any political conditions;
4. any mechanical or constructional difficulties or condition;
5. any diseases, local laws or climatic conditions,
6. any conditions, developments, actions or omissions outside of the control of the Releasees; and,
7. any other expected or unexpected conditions, developments or risks connected with travel, foreign travel, or staying in a foreign country, even if I suffer the loss of money, property, health, or life, and irrespective of who is or may be at fault, or whose negligence, including the negligence of the Releasees, many have caused my loss, injury or death.

I HAVE READ EACH AND EVERY WORD IN THIS AGREEMENT. I FULLY UNDERSTAND ALL OF THE TERMS OF THIS AGREEMENT AND THEIR SIGNIFICANCE. I VOLUNTARILY SIGN THIS RELEASE AND INDEMNITY AGREEMENT.

Name of Participant (Please print) Telephone _____ (_____) _____

Address Education Internship Research Assist.
Name of Program (check)

SIGNATURE _____ Date _____

THIS IS A RELEASE AND INDEMNITY AGREEMENT

FINAL PARTICIPANT RELEASE

I, the undersigned, an applicant for admission to ITEC Programs in Panama, do waive and release any and all claims against ITEC and its agents or host institutions for any injury, accident, or damages caused by any vehicle, act of war, weather, strike, sickness, quarantine, terrorist activity, government restriction or regulation, or stemming from any act or omission of any airline, railroad, bus, hotel, taxi service, school, college, or other firm, agency (government or private), company, or individual. I also release ITEC and its agents and agree to indemnify them with regard to any financial obligations or liabilities that I may incur personally or any damage resulting from participation in these Programs. I do waive and release all claims, demands or causes of action against ITEC and its agents, host institutions or other facilities within the United States of America and abroad, for any injury, loss, damage, accident, delay, or expense resulting from the use of any vehicle, any strikes, war, weather, sickness, quarantine, service, hotel, restaurant, school, college, or other firm, facility, company or individual.

I understand that all travel involves some risk, and I hereby agree to assume such risk that is inherently part of foreign travel as a condition of my acceptance and participation in ITEC Programs. I hereby waive and release any and all claims against ITEC and its agents for any injuries, damages, or losses incurred in connection with terrorist activities, social or labor unrest, mechanical or construction difficulties, diseases, local laws, climatic conditions, abnormal conditions, or developments, or any other actions, omissions or conditions within or outside the control of ITEC. By my participation in this program, I voluntarily assume any risks involved in such travel and presence abroad, whether expected or unexpected. I hereby acknowledge that I have been warned of such risks, and that I have been advised to take appropriate action and to govern myself accordingly. I am also aware that certain insurance companies offer insurance against some or many of the perils noted, and that I must opt to insure myself.

I hereby grant ITEC and its agents full authority to take whatever actions they may consider warranted under the circumstances concerning my health and safety, and I fully release each of them from any liability for such decisions or actions as may be taken in connection therewith. I authorize ITEC and its agents, at their discretion, to place me at my own or my parent's, parents', or guardian's expense and without further consent, in a hospital within or without my country of residence for medical services and/or treatment, or if no hospital is readily available, to place me in the hands of a local physician for treatment, should the need arise. If deemed necessary or desirable by ITEC or its agents, I authorize them to transport me back to my country of residence by commercial airline or other accessible conveyance, and I assume responsibility of all expenses involved. Any funds advanced to me for any purpose will be reimbursed upon demand by either myself or my parent(s) or guardian. I have been advised that I must be covered by adequate health and accident insurance, valid in and outside my country of residence during the entire period of the specific ITEC program to which I am applying.

I agree to comply fully with the rules of ITEC and its agents, its host institutions and/or travel companies. I agree that ITEC has the right to enforce standards of conduct and academic integrity and that, should I fail to comply with them, ITEC has the right to terminate my participation in the Programs with no refund of monies paid. In the event of termination, I agree to be sent home at my own or my parent's, parents', or guardian's expense. I understand that this is an organized program of study or participation and that group standards must be observed. I will comply with the rules, standards, and instructions for participant behavior. I hereby waive and release any and all claims against ITEC or their agents arising out of my failure to remain under such supervision or to comply with rules, standards and instructions. I agree that ITEC and its agents have the right to terminate my participation at any time for failure to maintain standards or for any actions or conduct which ITEC and/or any of its agents deem to be incompatible with the interest, harmony, comfort, and well being of the other participants.

I understand that ITEC and its agents reserve the right to make changes in programs, itineraries, schedules, and academic calendar as may be required. I understand that if the program changes occur they will not impair or weaken the goals, educational objectives or academic standards of ITEC Programs. All reference to "parent" of the applicant shall include the legal guardian or other adult responsible for the applicant. The term "participant" refers to all individuals, students, instructors, teaching assistants, directors, field coordinators, research assistants, and long-term independent researchers engaged in ITEC programs or residing at the Bocas del Toro Biological Station.

I have read the terms and conditions set forth in the ITEC Information Packet for Programs conducted at the Bocas del Toro Biological Station, Panama, and I agree that these constitute a part of my agreement with ITEC. I understand and agree to all of ITEC's terms as set forth in the Information Packet and in this Release. I further understand that this agreement shall take force only upon my acceptance into ITEC Programs.

Name of Applicant (Please Print) _____

Signature of Applicant _____ Date _____

Please Return Application to:

**ITEC Education Programs
2911 NW 40th Place
Gainesville, Florida 32605 USA**

COURSE TUITION

4-Week Summer Sessions:	\$2050
3-Week Winter Session:	\$1850

Course tuition includes registration, room and board at the Bocas del Toro Biological Station, transportation and lodging during the 3-day Boquete cloud forest field trip, local transportation around Isla Colon. Tuition fee does not cover air fare or hotel costs, emergency medical costs, optional field trips, soft drinks, beer, or incidental travel unrelated to courses.

Important: If you are applying for a **field course**, please include a \$100 registration fee and deposit when your application is submitted. Your application will not be processed until this deposit is received. The registration fee will be applied to your tuition and is refundable to within 30 days of the course starting date. All payments must be in U.S. currency. Make checks payable to ITEC.

Tuition must be received by application deadlines. Please note that ITEC reserves the right to cancel a course if student enrollment is less than five at the date of the application deadline.

Refund Policy If you withdraw from your course within 30 days of the course starting date, all deposits and tuitions will be completely refunded. If you withdraw from your course less than 30 days from the start of your course, only the portion of your tuition used for lodging, meals and local transportation (\$500) will be refunded. This policy is necessary because enrollment figures at 30 days prior to the start of each course are used to determine the hiring of faculty, teaching assistants, program directors and staff. Thus, we will have to expend your share of these tuition cost regardless of whether you are there or not. Students wishing to withdraw late may use their tuition towards another ITEC course in a subsequent session or year. If ITEC cancels a course, all deposits and tuitions will be completely refunded, or students may transfer to different courses, subsequent session or year.

Course Cancellation Policy ITEC reserves the right to cancel a course due to insufficient enrollment (less than 5 students or at our discretion.) Courses may be canceled at any time as a result of accident or severe illness of the instructor (when no replacement can be found). Students who have enrolled in classes that are cancelled will be notified no less than 30 days before the beginning of the class. They will be given the option of transferring to another class, in the same or a different , session. They may also choose to cancel their enrollment and receive a refund of their deposit and any tuition that has been paid. Paid fees may also be applied to future years' classes. We cannot refund any travel expenses that the student has incurred before learning of the cancellation of a class. We can, however, provide some alternate ideas for making use of tickets to the area.

ITEC STUDENT RECOMMENDATION FORM

Applicant: Please complete the top section of the form and give it to your professor or academic advisor.

Applicant's name _____

Program: Field Course _____ Internship _____ Research Assistants _____

Phone _____ (_____) _____ Email _____

Applicant's Signature _____
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Referee: The student listed above has applied to participate in an intensive field program taking place at the Bocas del Toro Biological Station in Panama, Central America. Students, Research Assistants and faculty live together in a close, continuous academic and social environment which presents significant intellectual and interpersonal challenges to everyone involved. Consequently, it is important to evaluate the applicant's academic preparedness, level of maturity, interpersonal skills, and potential for success in this type of program. Please answer the following questions:

How long have you known the applicant? _____

In what capacity do you know the applicant? _____

How would you rate the applicant academically against his/her peers ? (circle one)

upper 5% upper 10% upper 25% upper 40% average below average

Please provide a short but thorough letter of recommendation for the applicant which addresses points listed above (write below or attach a letter).

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Name _____

Academic address _____

Academic title _____ Phone _____ (_____) _____

Email _____ Date _____

Signature _____

Please forward this form to: ITEC, Education Programs, 2911 NW 40th Place., Gainesville, FL 32605. If you have any questions regarding our program please contact us at: 352-367-9128 or via email at: ITEC@itec-edu.org. Also, you may want to visit our web site at: <http://www.itec-edu.org>

PREVIOUS STUDENT CONTACTS

Here is a list of past students who have offered to provide an evaluation of ITEC courses and programs. Feel free to contact any of them. Abbreviations are: **CRE**=Coral Reef Ecology, **NEH**=Neotropical Herpetology, **APH**=Adventure Photography, **PRE**=Primate Ecology, **TAB**=Tropical Animal Behavior, **TEB**=Tropical Ethnobotany, **TRE**=Tropical Rainforest & Canopy Ecology, **RA**=Research Assistant, **RES**=Researcher.

Lais Chaves (CRE 10) Universidade Federal de Pernambuco, Brazil, chaveslais@hotmail.com

Adam Clause (TAB 09) University of California, Davis, CA, aclause@roadrunner.com

Raluca Cruceanu (NEH 10) New Collage of Florida, Sarasota, FL, rcruceanu@yahoo.com

Melissa Donnelly (TAB 10) Univ. of Toronto, Ontario, Canada, Melissa_donnelly@hotmail.com

Doug Doughty (PRE 02, RES 09, 10) Univ. of Birmingham, England, dougdoughty@sympatico.ca

Michael Drake (NEH 07, APH 10) Auburn University, Auburn, AL, drakemc001@gmail.com

Eva Drinkhouse (TRE 10) New York University, New York, NY, evester417@hotmail.com

Amy Fehr (CRE 10) Okanagan College, BC, Canada, amyfehr@msn.com

Fiona Greatbanks (CAT 10) University of Hawaii, Honolulu, HI, figreatbanks@gmail.com

Gareth Hopkins (NEH 09) Univ. Northern British Columbia, Canada, gareth.r.hopkins@gmail.com

Liat Krongrad (CRE 10) New College of Florida, Sarasota, FL, liat.krongrad@ncf.edu

Ellie Loggins (TAB 10) Evergreen State College, WA, vivaelliegirl@gmail.com

Joaquin Magana (CRE 10) Univ. of Uppsala, Sweden & Univ. of Belize, joako60@yahoo.com

Micah Marty (CRE 10) State Olaf College, Northfield, MN, micahjmarty@gmail.com

Holly McCullough (NEH 10) University of Manatoba, Winnipeg, Canada, holly_mcc5@hotmail.com

Luke McKee (PRE 10) Beloit College, Minneapolis, MN, mckeel@beloit.edu

Matthew Minder (CAT 10) Rutgers University, NJ, mminder@eden.rutgers.edu

Samantha Ortiz (CRE 10) New College of Florida, Sarasota, FL, samantha.ortiz@ncf.edu

Kimberly Pastrok (TRE 10) Trent University, Calgary, Canada, kimberleypast@trentu.ca

Ruchi Patel (TRE 10) Rutgers University, NJ, ruchpate@eden.rutgers.edu

Christian Paullin (CRE 10) Claremont McKenna College, Claremont, CA, mpaullin@capstan.cc

Jaime Pritchard (APH 10) Colorado State University, Fort Collins, jpritch@rams.colostate.edu

Matt Rhodes (TRE 10) Truman State University, MO, matt.k.rhodes@gmail.com

Catherine Sheard (TRE 10) Yale University, New Haven, CT, catherine.sheard@yale.edu

James Sweetman (CAT 09) Univ. West of England, Bristol, England, jamessweetman@btinternet.com

Adara Whithers (CRE 10) University of Wairato, Hamilton, New Zealand, adarawithers2@gmail.com

Jessie Uehling (APH 09, Glanzer Scholarship 10), Humboldt University, CA, jku1@humboldt.edu