



**2024-2025**

**Healthcare Science**

**Policy & Procedures**

**Handbook**

**Student's Name:**

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## Healthcare Science Handbook

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## **INTRODUCTION**

This manual is provided to all Alvernia Healthcare Science students involved in an internship experience and to the director or supervisor of the agency where students are placed. The purpose of this manual is to provide a clear understanding of the objectives of the internship; the responsibilities of the student, the agency and the University; and the procedures for the successful completion of the student's practicum.

Internship is a significant part of a student's preparation for professional practice. The field experience offers placement in a live agency environment concurrent with classroom activity. It is through the internship that the integration of classroom learning and practicum learning in agency settings takes place.

## **WHAT IS HEALTHCARE SCIENCE?**

The purpose of the Healthcare Science Program is to provide a rigorous curriculum, which will prepare graduates for meaningful roles and careers in our current healthcare environment. Consistent with the university's Franciscan values, students will become broadly educated, life-long learners who will engage with their communities. Utilizing a strong interdisciplinary design, this program encourages service and the promotion of healthy lifestyles for all persons of all abilities, income levels and social/cultural backgrounds. The Healthcare Science program creates advocates for individuals and communities that are underserved or under-informed on issues related to health and wellness, health systems policies and health management. Students with a healthcare science degree will graduate prepared to work in healthcare agencies, businesses, and various medical care settings.

The Healthcare Science Program is an excellent mid-degree opportunity for transfers or new applicants with associate degrees as occupational therapy assistants, physical therapy assistants, medical imaging professionals, dental hygienists, and respiratory therapists. Students in the healthcare science program are concerned with the well-being of all people. Completing the healthcare science program requires a mastery of science, the ability to engage in critical appraisal, and the desire to serve the community. In addition to taking the required courses in healthcare science, students are able to study in an area of concentration such as business, communication, biology, etc.

The Healthcare Science Program prepares students for work in healthcare agencies, businesses, and medical care settings as healthcare educators, healthcare advocates, or healthcare managers. Emphasis on health behavior theories through educational programming and experience with practical applications through volunteer service in the health field will provide students with a variety of educational tools and techniques to use in their professions. Healthcare program graduates could enter the healthcare field as health counselors or advocates, science and health writers, policy analysts. In addition, graduates

from the healthcare science program may find positions in government organizations, consumer groups, healthcare agencies, scientific research or consumer institutes.

## **NON-DISCRIMINATORY POLICY**

The Healthcare Science Program conducts all aspects of the educational program without discrimination on the basis of race, color, religion, creed, gender, ethnic or national origin, disability, age or political or sexual orientation.

ALVERNIA UNIVERSITY complies with all applicable federal, state and local nondiscrimination laws in the administration of its educational programs, services, and employment relationships. We are committed to equality. Continued and responsible growth of our university results from enhancing and utilizing the abilities of all individuals to their fullest extent practicable within the framework of our environment. All employment decisions advance the principle of equal employment opportunity. In addition, personnel activities such as recruitment, interviewing, selection, promotion, training, benefits, transfers, lay-offs, demotion and discipline are administered according to good business practices, the Equal Employment Opportunity Act of 1972, Executive Orders concerning equal employment opportunity, and Equal Employment Opportunity Commission regulations and guidelines, all of which require that all persons have equal employment opportunities and strictly prohibit discriminatory and harassment practices.

The participation of women and minorities in management by employment and promotion will continue to be emphasized so that they may be given the opportunity to contribute to the success of the university. All employees of Alvernia University will continue to approach this responsibility with the sensitivity and human concern they have in the past.

The Human Resources Office is charged with the responsibility to maintain the necessary programs, records and reports to comply with all government regulations, and with the goals and objectives of our equal employment opportunity program. Any employee, student, or applicant of this university who feels that he or she has been discriminated against in employment or recruiting should contact the Human Resources Office to pursue the proper discrimination complaint procedure.

## **SPECIAL NEEDS AND ADA ACCOMODATIONS**

[Alvernia Accessibility Services](#)

## **MULTILINGUAL STUDENT SUCCESS**

[Multilingual Success](#)

## **AGENCY AFFILIATION AGREEMENT**

The Healthcare Science Program requires that an Agency Affiliation Agreement be signed between the agency and the University prior to allowing students to participate in internship experience. The University will also provide the agency with a certificate of liability naming the agency as an additional insured for the purposes of the student's internship. The Affiliation Agreement may be obtained from the Chair of the program or from the Program Secretary.

### **CRITERIA FOR AGENCY SELECTION**

Factors to be considered in selection of an agency for student placement include:

- A. Licensed by the appropriate governing body, if applicable.
- B. The commitment, expertise and time of agency personnel to provide field instruction for the student.
- C. The ability of the necessary physical facilities to accommodate a student placement.
- D. Congruence between the agency philosophy and that of Alvernia University and the Healthcare Science Program.

The prime factors to be considered in selection of an agency for student placement include:

- A. The interest and ability of the agency to provide an appropriate learning environment for the student.
- B. The commitment, expertise and time of agency personnel to provide field instruction for the student.
- C. The availability of the necessary physical facilities to accommodate a student placement.
- D. A commitment to the relevant Code of Ethics and the University's Nondiscrimination Policy.
- E. Support the values and mission of the profession of healthcare and the mission of the Healthcare Science Program at Alvernia University.
- F. Congruence between the agency philosophy and that of the University and the profession of healthcare.

### **EMPLOYMENT BASED FIELD PLACEMENTS**

Students who wish to complete an internship in an agency in which they currently work must complete the "Work Study Application" found in the Forms section of this manual. The responsibilities of the student must meet program standards including the following: placement responsibilities and tasks must be in addition to and different from current job responsibilities, the student must be supervised by a licensed and/or qualified personnel and may not be the student's current supervisor, and the student must complete additional placement hours - not regular work hours.

## **INTERNSHIP EXPERIENCE COURSE OBJECTIVES**

This Internship experience is a fundamental component of preparation for professional practice. Students are expected to exhibit satisfactory progress and proficiency in the following areas:

1. Analyze and outline the role of the practicum agency as an integral part of the community's Healthcare system, and describe the roles that the agency and its professional staff play in addressing Healthcare related problems.
2. Apply applicable legal and ethical standards and therapeutic boundaries in professional practice and - with the assistance of field supervision - demonstrate sound ethical decision making and professional judgment.
3. Integrate and synthesize academic knowledge with professional practice and actively engage in activities to enhance professional competence.
4. Demonstrate reflection, self-awareness and cultural competency in professional practice, and assess one's own values, beliefs, biases, thoughts, feelings, actions and reactions within the experience.
5. Contribute to personal, professional and civic development by exercising initiative and displaying professional conduct in the practicum setting.

## **RESPONSIBILITIES OF THE UNIVERSITY**

1. Ensure only those students assigned to internship education have satisfactorily completed the pre-requisite portion of their curriculum.
2. Provide the services of an Internship Supervisor who shall act as liaison between the University and the Facility. The Supervisor will schedule appropriate visits, consultation conferences, and be available by telephone or email as needed.
3. Ensure that the student provides the Facility with required personal and academic information.
4. Ensure that students adhere to the health criteria established by the University.
5. Ensure that each student has completed all required background checks.
6. Maintain records of student's health, immunization and background clearances.
7. Records are available by written request and permission of the student.
8. Carry professional liability insurance for all students of at least one million dollars per occurrence and three million dollars annual aggregate.
9. Ensure that each student provides proof of health insurance coverage.

## **RESPONSIBILITIES OF THE AGENCY**

1. Retain the ultimate responsibility that safe and effective services are provided to patients/clients.
2. Maintain a sufficient number of professional personnel supports to carry out normal service functions, so students will not be performing in lieu of staff.

3. Provide supervision of the student by licensed and/or qualified personnel; Qualified refers to academic and experiential qualifications. Supervisors are not required to be licensed or allow the Supervisor a minimum of one-hour agency time per week, per student, for individual conferences.
4. Evaluate the student's performance on forms provided by the University and return to the Instructor of the internship.
5. Responsible to see that emergency care will be rendered to students during sudden illness, travel accident, or an institutional accident. The charges for such medical services shall be billed to the student or their insurance carrier.
6. Provide orientation for students assigned to the Agency to include, but not limited to, patient and personal safety measures, unit organization, equipment, and relevant agency policies.

### **MUTUAL RESPONSIBILITIES**

1. Adhere to proper channels of organizational structure and communication in making plans for students' clinical experience in accord with the required learning objectives and the opportunities available.
2. No student shall be deemed an employee of the agency by virtue of their participation in the Healthcare Science Program.
3. Evaluate the internship experience(s) and share results for the purpose of ongoing quality improvement and patient/client safety.
4. Comply with all applicable privacy requirements of the Health Insurance Portability and Accountability Act (HIPAA) and the confidentiality of patient/client information.
5. Affirm complete Agreement with the University Harassment Policy showing no tolerance for any form of harassment.
6. The laws of the Commonwealth of Pennsylvania will be used to interpret this Agreement and the jurisdiction. Any dispute resolution will be in Berks County, Pennsylvania.

### **RESPONSIBILITIES OF THE STUDENT**

#### *Toward the University:*

1. To act in accordance with the ethical standards of the most recent version of the American Counseling Association (ACA) Code of Ethics.  
(<https://www.counseling.org/resources/aca-code-of-ethics.pdf>)
2. To discuss with the Internship Supervisor preferences for field placement experiences, given the student's background, interest and education.
3. To fulfill the time requirements of the course. The schedule is to be mutually agreeable with the agency and the student's class schedule, subject to advisor approval.
4. To develop a written agreement with the Internship Supervisor outlining specific goals, objectives, and responsibilities of field placement during the practicum. A copy of the agreement must be submitted to the Instructor for final approval. Significant

changes to the agreement during the semester must be incorporated into a revised agreement and resubmitted to the Practicum Instructor.

5. To inform and seek the assistance of the Instructor regarding problems related to the field placement.
6. To actively participate in classroom sessions and complete all written assignments, including student logs and the final paper.

*Toward the Agency:*

1. To act in accordance with the ethical standards of the most recent version of the American Counseling Association (ACA) Code of Ethics. To participate in the internship experiences, to meet all the requirements which the agency establishes and to complete all assigned tasks by the end of the semester during which they registered for the practicum.
2. To develop an agreement with the Internship Supervisor outlining specific goals, objectives and outcomes, and to make adjustments to the agreement when necessary.
3. To actively participate in supervisory conference, staff meetings, and general functioning of the agency.
4. To make contributions to the operation of the agency through the completion of all assigned tasks and duties.

## **CRITERIA FOR DISMISSAL**

The following are examples of behavior which are considered serious and constitute criteria for dismissal from the practicum site and ultimately from the Healthcare Science Program.

1. The inability to relate and interact appropriately with others, to use appropriate professional judgment, to perform in an appropriately professional manner, to function appropriately within the classroom or internship setting, or to demonstrate the appropriate knowledge, values, and skills necessary for professional Healthcare Science practice.
2. Major violations of the American Counseling Association Code of Ethics. (examples include: without limitation: lack of cultural competence and respect for social diversity with respect to race, ethnicity, gender, sexual orientation, socioeconomic class, age, disability, and religion; inappropriate relationships with clients and other boundary violations, confidentiality violations.)
3. Failure to respect the rights of others as evidenced by disrespect toward faculty, field instructors, professional staff, colleagues and clients; verbal, physical or mental abuse

of others; harassment of any kind; assault; or any action which endangers the rights or safety of others.

4. Criminal activity or conviction while in the Healthcare Science Program, including failure to abide by laws prohibiting the use, possession, and sale of illegal substances. (Students are expected to inform the Chair of any and all criminal convictions).
5. Untreated or unresolved personal issues which impair performance or safety in the classroom or in the field, including mental health conditions and substance abuse.
6. Lying, cheating, or plagiarizing in course work or fieldwork.
7. Persistent inability or unwillingness to perform assigned activities, meet deadline dates on classroom or field assignments, or excessive tardiness or absenteeism.

### **GRIEVANCE POLICY FOR DISMISSAL**

Each student has the right to grieve a dismissal. The following procedures should be observed as outlined in the Alvernia University Student Handbook:

1. Student discusses the situation with the Program Director within seven days after being notified of non-acceptance into the program.
2. If no accord is reached, student has seven calendar days to consult with the Department Chair.
3. If no accord is reached, student has seven calendar days to consult with the College Dean.
4. If still no accord is reached, student will be informed by the College Dean that he/she has a right to appeal to the Student Grievance Committee
5. Student will have seven working days to contact the Chair of the Student Grievance Committee and express his/her concerns in writing on why he/she should not be dismissed from the Healthcare Science program.

### **ACADEMIC GRIEVANCE PROCEDURES**

The Student Grievance Committee attends to grievances of an academic nature. The Committee is composed of faculty members and two students. The Student Government Association selects the students. The Committee members elect the chair. The Committee is involved in a student grievance only if the proper steps have been followed as outlined herein:

1. Student discusses situation/grade with instructor within 20 calendar days of occurrence/disagreement.
2. If no accord is reached, the student has seven calendar days to meet with the department chair.
3. Again, if no accord is reached at this level, the student has seven calendar days to consult with the division dean.

4. At this point, if there has been no resolution, the division dean apprises the student of the right to appeal to the Student Grievance Committee.
5. Student has seven calendar days to contact the Chair of the Grievance Committee. The Committee hears a case only after there has been an attempt to rectify the situation through discussion with the student, Instructor, Department Chair and/or the Division Dean. If no solution is reached at this point, the student files a grievance.
  - a. The Committee Chair contacts the faculty member who was named in the grievance.
  - b. Both the student and faculty involved submit separately, in writing, their versions of the grievance. Each has seven calendar days to submit same.
  - c. Student and faculty involved may also be asked to separately discuss the nature of the grievance at a meeting of a majority of the committee.
  - d. The Committee works with the Provost, academic advisers, and the Vice President for Enrollment Management and University Life to make students and faculty aware of its procedures.
  - e. The Committee takes into consideration guidelines for ethical behavior as stated in this handbook, the Faculty Handbook and the University Catalog.
  - f. After thoroughly reviewing the grievance, the Committee issues a written recommendation of a resolution to the Provost who reviews the decision.
  - g. If the Provost feels that the decision was reached according to proper guidelines, written notification of the decision is issued to the student and the faculty member involved in the grievance.
  - h. Should the Provost note that stated procedures were not adhered to, he or she notifies the Committee Chair who returns to the Committee members to rectify the errors.
  - i. The Committee reaffirms the recommended resolution or proposes a revised recommendation. The Chairperson maintains a complete file of grievances and committee proceedings.

### **STATEMENT REGARDING STUDENTS ROLE IN THE AGENCY**

The role of the student in the agency is primarily a learning role rather than a working role, even though it is inherent in the field placement experience that the student be assigned duties and responsibilities. By accomplishing the assigned tasks, the student should learn to integrate theory and information/education with its application at agency.

In order to facilitate the distinction between the roles of Healthcare Science student and of agency employee, the following guidelines are offered:

1. Assignments, both in type and number, should be appropriate to the learning and experience level of the student. The assignments should complement the acquired knowledge gained through classroom instruction and progress (when appropriate) in difficulty and responsibility.

2. The assignments at the agency should offer a range of experiences, so that each student may become familiar with the purpose and functions of the entire program and its place within the Healthcare Science service delivery system.
3. While it is recognized that each field placement will offer a unique learning experience, it is expected that each student have the opportunity to develop and practice skills in the areas basic to the agency.
4. It is essential that students become actively involved in participating in real direct service activities to the extent reasonable and appropriate. It is understood that such involvement may or may not include the actual delivery or performance of clinical services, or participation therein, depending upon the policies of the agency, the nature and circumstances of the services involved, and the capabilities of the student.
5. Sufficient time should be allowed within the field work hours for the student to complete the assigned tasks, including the fulfillment of all necessary paperwork.
6. Participation by the student in staff meetings, in-service programs and conferences is encouraged so as to broaden the learning of the student and develop a deeper understanding of the functioning of the agency.
7. The Internship Supervisor should contact the Instructor of the Internship at any time during the placement to address any concerns or to resolve any difficulties, insuring the best possible learning environment for the student

## **SUGGESTIONS FOR THE AGENCY FIELD SUPERVISOR**

The development of a structured and meaningful practicum plays an extremely important role in the student's overall education. Alvernia University takes the opportunity to identify some basic experiences for the student majoring in Healthcare Science as they are placed in the agency for field experience.

### **ORIENTATION TO THE AGENCY'S PROGRAM**

We ask that prior to the start of the formal internship experience that the student meet with the Director and tour the agency. Some familiarity within the agency and its procedures eases the student's adjustment. Learning and independence are also developed by encouraging the student to plan their own orientation to the agency.

### **SUPERVISION**

The Field Supervisor is requested to spend a *minimum* of one hour per week with the student for individual supervisory conferences, which should review and address the following issues:

1. Student's observation of, and involvement in, agency activities.
2. Progress made toward student objectives.
3. Ethical issues encountered during the practicum experience.
4. Incorporation of knowledge, values and skills into professional practice.

5. Student's self-reflection and self-awareness of their thoughts, feelings and actions, and how these impact professional practice.

## **SELF-AWARENESS**

It is essential for students to increase self-awareness, particularly their personal values, beliefs, biases, thoughts, feelings, actions and reactions, and the impact these issues have on their professional practice. Becoming self-reflective is a crucial attribute for the student to develop as part of their commitment to the Healthcare profession and to the ethical structure that embraces the profession. The Instructor is requested to facilitate student selfreflection and self-awareness.

## **CONFIDENTIALITY AND ETHICS**

*Alvernia University is committed to developing ethical leaders with moral courage. As such, it is essential* for students to learn, practice, and be guided by codes of ethical standards most closely associated with the Healthcare profession and the agency. The Instructor is requested to reinforce the importance of ethical practice throughout the practicum. In addition, issues of confidentiality which were learned in the classroom should be reviewed as it relates to the agency's work with individuals, families, and groups.

## **EXPERIENCE IN AGENCY SETTINGS**

In clinical settings we would ask the Internship Supervisor to have the student enhance the practicum education through observations of and/or participation in the following activities:

- a. Intake and assessment processes.
- b. Evaluation to determine appropriate diagnoses and level(s) of care.
- c. Gathering of bio-psychosocial information.
- d. Development and periodic review of treatment/service planning.
- e. Individual, group and/or family counseling.
- f. Case management.
- g. Case consultation and team meetings.
- h. Development of continued care (aftercare) plans.

## **EXPERIENCE IN COMMUNITY SETTINGS**

The student needs to gain an understanding of the relationship between the agency or program to the larger Healthcare system and to community problems and services. Attendance at inter-agency and community meetings is encouraged wherever possible.

## **ANALYZING PROBLEMS AND WORKING TOWARD CHANGE**

The student needs to gain experience in identifying, assessing and diagnosing problems as well as developing service or treatment plans to affect desired changes. They need to experience obtaining

information and facts, analyzing situations and planning change. They also need to see that this applies to work with individuals, groups and communities.

## **RECORDING**

The student needs to gain experience in recording informational data, summarizing material and documenting activities. Such activities may include, but need not be limited to: intakes, biopsychosocial histories, service or treatment plans, individual and group notes, continued care plans, staff meeting notes, short and long range goals, etc.

## **EVALUATION AND FEEDBACK**

The student needs to understand that feedback and evaluation are important parts of the behavioral health profession, whether they are working with individuals, groups, or in community projects. Self-evaluation should be a continuous process, as well as the ongoing evaluation by the agency Internship Supervisor. The final evaluation at the end of the practicum should be a recapitulation of previous developments discussed with the student. Forms to be completed by both the student and Internship Supervisor are included with this manual.

## **STUDENT CLEARANCES**

See Appendix A

## **HEALTHCARE SCIENCE MAJORS MANDATORY ONLINE HIPAA EDUCATION**

### **POLICY**

It is the policy of Alvernia University Division of Professional Programs' Health Care Students and Faculty (Athletic Training, Nursing, Occupational Therapy, Social Work, and Healthcare Science) to participate in a mandatory online Health Insurance Portability and Accountability Act (HIPAA) Education Session prior to entering clinical field work with client contact.

### **PURPOSE**

The goal of this program is to identify HIPAA initiatives regarding patient privacy and data security and to help healthcare workers comply with the guidelines.

### **COURSE OBJECTIVES**

1. Describe the overall purpose and goals of HIPAA.
2. Discuss the compliance issues with privacy reforms, including written notice, acknowledgement, prior authorization, and minimum disclosure.

3. Discuss compliance with data security reforms, including issues regarding workplace layout, information storage, and rules covering conversation.

## PROCEDURE

1. Access the online *HIPAA for Healthcare Workers* program by Any computer with online access may be used. Education Interface will be used.
2. Create an account following directions on the screen. There is not an Alvernia identifier, so use any ID and Password you wish.
3. Enter personal registration information following directions on the screen. Identify yourself having a License in PA and enter “RN” in the Type of License Window.
4. Proceed to program instructions. NOTE: you may need to install the free version of RealPlayer for the streaming video to work. There is a link on the screen.

## **BACKGROUND CHECK POLICY –ACADEMIC PROGRAMS**

**It is the policy of Alvernia University’s academic programs to fully comply with Pennsylvania Laws related to criminal record and child abuse history clearances prior to entering any field/clinical educational setting that involves direct contact with children or older adults (defined as a person who is 60 years of age or older) and is associated with academic programs and/or service learning. Depending on the academic program, a repeated background check may be required prior to entering senior-level coursework.**

Students in academic programs and/or service learning (if required by the facility) with convictions/charges documented on the background check reports will be advised on an individual basis. The student must understand and agree that Alvernia University may disclose the results of the background checks to the clinical/field facility where the student has sought to be placed. Certain types of clinical/field facilities have the right and/or responsibility to preclude students from the facility who have a history of criminal activity or child abuse.

Additionally, applicants to the **Education** and pre-license **Health** Programs (Nursing, Occupational Therapy and Social Work) must understand that in order to meet program outcomes they are obliged to directly work with children (Education and Nursing) and/or older adults (Nursing, Occupational Therapy and Social Work). **There are no alternatives to meet program outcomes.** Such applicants/students with convictions/charges documented on the criminal\* or child abuse reports will be denied acceptance into courses with associated clinical/field practice and therefore cannot complete the applicable program of study. Such applicants/students will be advised of other academic study options at Alvernia University.

\* Convictions/charges documented on a PA Criminal Record Check report will be based on criteria outlined in Acts 169/13.

Many professions require further licensing or certification beyond a college degree and applicants may be denied employment in certain occupations for misdemeanors and felony

convictions, including alcohol related offenses. Refer to the Pennsylvania Liquor Control Board for a complete listing of criminal violations related to licensure [www.lcb.state.pa.us/edu/](http://www.lcb.state.pa.us/edu/).

Academic programs will include written statements regarding background checks in their marketing and catalog documents. Students will be advised of the background check policy during the admission process prior to service learning (if required by the facility).

The specific laws affecting background checks and the accompanying mechanism of checking are outlined on the following page.

### **PROCEDURES:**

Students are responsible for obtaining the following clearances. The fees for the clearances are the responsibility of the students. A copy of the clearances will be maintained in the student's file.

1. Act 34 – PA State Police Criminal Record Check
2. Act 114 – FBI Clearance (fingerprint clearance through the Cogent System)
3. Act 151 – PA Child Abuse History Clearance

The decision to not allow enrollment in a Nursing Program clinical course based upon a positive criminal or child abuse record check may be appealed by the student. See Alvernia University Student Grievance Policy and Process.

Law	Description	Requirement	Mechanism of Checking
<p>Older Adults Protective Services Act</p> <p>OAPSA Act 169 (1996) and Act 13 (1997)</p> <p>(www.aging.state.pa.us)</p>	<p>Affects employees/students in nursing homes, personal care homes, domiciliary care homes, adult daycare centers and home health care providers</p>	<p>Submit to a criminal record background check</p> <p>Report the suspected abuse of any person who is receiving care from the agency regardless of age</p>	<p>PA Criminal Record Check</p> <p>For students who have not been residents of PA for two consecutive years immediately preceding the date of application, a Federal Bureau of Investigation (FBI) Criminal History Background check on the required Department of Aging Form (FD-258 and PDACBC-1)</p> <p>(8/31/07 Department of Aging Memo)</p>
<p>PA Department of Public Welfare Child Protective Services Law</p> <p>Section 6344 Title 23 Pa. Chap. 63 Act 73</p> <p>(www.dpw.state.pa.us)</p>	<p>Affects any individual with a significant likelihood of regular contact with children in the form of care, guidance, supervision or training.</p>	<p>Submit to PA Child Abuse History Clearance, PA Criminal Record Check, and FBI Criminal History Background Check</p>	<p>PA Child Abuse History Clearance Form (CY-113-UF)</p> <p>PA Criminal Record Check</p> <p>FBI Criminal History Background Check via Cogent Systems</p>
<p>PA Department of Education</p> <p>Act 34 (1985) amended by Act 114 (2006) (criminal background)</p> <p>Act 151 (child abuse)</p> <p>Section 111 of Public School Code and Chapter 8 of State Board of Education Regulations</p> <p>(www.teaching.state.pa.us)</p>	<p>All student teachers participating in classroom teaching, internships, clinical, or field experiences; prospective employees of public and private schools, vo-tech, and intermediate units who have direct contact with children must provide a copy of PSP, FBI reports no more than 1 year old</p>	<p>Submit to PA Child Abuse History Clearance, PA Criminal Record Check, and FBI Criminal History Background Check</p>	<p>PA Child Abuse History Clearance Form (CY-113-UF)</p> <p>PA Criminal Record Check</p> <p>FBI Criminal History Background Check via Cogent Systems</p>

PA Department of Education  Background Checks (Act 114 and Act 24) Changes to Section 111 of School Code September 28, 2011	Act 24 of 2011 contains a number of significant changes to the PA School Code that are designed to enhance the safety of school children. Section 111 applies to all student teachers participating in classroom teaching, internships, clinical, or field experiences; prospective employees of public and private schools, vo-tech, and intermediate units who have direct contact with children.	Required reporting within 72 hours of any arrest or conviction of an offense listed in Section 111e that has occurred after September 28, 2011.	PA Child Abuse History Clearance Form (CY-113-UF)  PA Criminal Record Check  FBI Criminal History Background Check via Cogent Systems  PDE reporting form 6004
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**Prohibitive Offenses Contained in Act 169 of 1996 as Amended by Act 13 of 1997**

<b><u>Offense Code</u></b>	<b><u>Prohibitive Offense</u></b>	<b><u>Type of Conviction</u></b>
CC2500	Criminal Homicide	Any
CC2502A	Murder I	Any
CC2502B	Murder II	Any
CC2502C	Murder III	Any
CC2503	Voluntary Manslaughter	Any
CC2504	Involuntary Manslaughter	Any
CC2505	Causing or Aiding Suicide	Any
CC2506	Drug Delivery Resulting in Death	Any
CC2702	Aggravated Assault	Any
CC2901	Kidnapping	Any
CC2902	Unlawful Restraint	Any
CC3121	Rape	Any
CC3122.1	Statutory Sexual Assault	Any
CC3123	Involuntary Deviate Sexual Intercourse	Any
CC3124.1	Sexual Assault	Any
CC3125	Aggravated Indecent Assault	Any
CC3126	Indecent Assault	Any
CC3127	Indecent Exposure	Any
CC3301	Arson and Related Offenses	Any
CC3502	Burglary	Any
CC3701	Robbery	Any
CC3901	Theft	1 Felony or 2 Misdemeanors
CC3921	Theft By Unlawful Taking	1 Felony or 2 Misdemeanors
CC3922	Theft By Deception	1 Felony or 2 Misdemeanors
CC3923	Theft By Extortion	1 Felony or 2 Misdemeanors
CC3924	Theft By Property Lost	1 Felony or 2 Misdemeanors
CC3925	Receiving Stolen Property	1 Felony or 2 Misdemeanors
CC3926	Theft of Services	1 Felony or 2 Misdemeanors

CC3927	Theft By Failure to Deposit	1 Felony or 2 Misdemeanors
CC3928	Unauthorized Use of a Motor Vehicle	1 Felony or 2 Misdemeanors
CC3929	Retail Theft	1 Felony or 2 Misdemeanors
CC3929.1	Library Theft	1 Felony or 2 Misdemeanors
CC3930	Theft of Trade Secrets	1 Felony or 2 Misdemeanors
CC3931	Theft of Unpublished Dramas or Musicals	1 Felony or 2 Misdemeanors
CC3932	Theft of Leased Properties	1 Felony or 2 Misdemeanors
CC3933	Unlawful Use of a Computer	1 Felony or 2 Misdemeanors
CC3934	Theft From a Motor Vehicle	1 Felony or 2 Misdemeanors
CC4101	Forgery	Any
CC4114	Securing Execution of Documents by Deception	Any
CC4302	Incest	Any
CC4303	Concealing Death of a Child	Any
CC4304	Endangering Welfare of a Child	Any
CC4305	Dealing in Infant Children	Any
CC4952	Intimidation of Witnesses or Victims	Any
CC4953	Retaliation Against Witness or Victim	Any
CC5902B	Promoting Prostitution	Felony
CC5903C	Obscene or Other Sexual Materials to Minors	Any
CC5903D	Obscene or Other Sexual Materials	Any
CC6301	Corruption of Minors	Any
CC6312	Sexual Abuse of Children	Any
CS13A12	Acquisition of Controlled Substance by Fraud	Felony
CS13A14	Delivery by Practitioner	Felony
CS13A30	Possession with Intent to Deliver	Felony
CS13A36	Illegal Sale of Non-Controlled Substance	Felony
CS13A37	Designer Drugs	Felony

## **HARASSMENT POLICY ACADEMIC FIELD EXPERIENCES**

### [Alvernia Title IX](#)

### [Harrassment and Misconduct](#)

## **FRATERNIZATION POLICY**

It is the policy of the Alvernia University Academic Programs that students should NOT fraternize on a personal level with staff, patients, students or clients during assigned academic field placements on or off campus. Selected examples of fraternization are:

- After hours personal contact with staff, clients, patients or students
- Inappropriate touching or gestures
- Inappropriate communication (implied or direct)
- Flirting

Upon receipt of a written complaint, the Dean will initiate an investigation. Following the completion of an investigation, appropriate corrective measures, if warranted, will be taken. Corrective measures may include:

- Verbal warning
- Written warning
- Dismissal from course
- Dismissal from academic program

## **ATTENDANCE POLICY FOR FIELDWORK**

Understanding that some absences are unpredictable or unavoidable (such as illnesses), a student may be absent up to two days per semester without incurring an obligation to make up the lost time. *It should be noted that a vacation does not constitute a legitimate reason for an absence.*

For absences in excess of two days per semester, it will be necessary for the student to plan with the field instructor and field liaison to make up the time lost. In all cases of absence, the student is expected to observe professional principles, notifying as quickly as possible any individuals who might be affected by their absence and repairing any damages to service that their absence might entail.

Students may not bank hours at their placements in order to take time off later in a semester.

## **HEALTHCARE SCIENCE FIELD EDUCATION DRESS CODE**

### **PROFESSIONAL APPEARANCE AND HYGIENE**

All social work field students will maintain a dignified professional appearance while they are in the field setting and also when attending Field Education Seminar classes.

#### **Hygiene**

All students will maintain a clean and neat appearance which includes:

<i>Hair:</i>	washed and combed with natural looking colors.
<i>Body:</i>	shower and use deodorant before each field work day.
<i>Mouth:</i>	brushed teeth and clean breath.
<i>Face:</i>	washed <i>Women – moderate makeup</i> <i>Men – Neat and trimmed facial hair</i>
<i>Nails:</i>	clean and trimmed <i>moderate polish or moderate manicures are acceptable for women</i>

#### **Body Fragrances**

Body fragrances need to be subtle or non-existent, as some individuals around you may be allergic to strong fragrances.

#### **Jewelry/Piercing**

Moderate jewelry can be worn in field.

<i>Piercing:</i>	one earring can be worn in each ear. All other visible earrings must be removed.
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#### **Tattoos**

Tattoos cannot be visible during field placement and/or seminar classes.

### **ACCEPTABLE FIELD DRESS**

#### **Skin Coverage**

Men – Skin will be covered between the base of the neck and the bottom of the foot, the arms will be covered at a minimum of polo length shirt coverage (no tank tops).

Women – Skin will be covered between the base of the neck and the bottom of the foot or the top of the knee if a skirt is worn. The arms will be covered at a minimum of polo length shirt coverage (no tank tops or spaghetti straps).

### Shoes

Students will wear moderate, professional looking shoes with closed toes and backs and with sensible heels (approximately 2" or less).

### Undergarments

Undergarments will not show in any manner. Bra straps, thongs, and underwear must be completely covered by clothing at all times. Students need to be able to stretch, sit and squat without any undergarments showing. Clothing should not be extremely tight fitting on any part of the body.

### Dress

All students will dress according to the style of professional or professional-casual dress of their agency.

#### *Professional Dress*

Male – suits, sport coat, collared dress shirt and tie, long dress pants in solid kaki, blue, grey, black or other conservative colors.

Female – pant suits, blazers, skirts, blouses, pullovers, long slacks in solid kaki, blue, grey, black or other conservative colors.

#### *Professional Casual Dress*

Male – collared shirt or polo shirt, sweaters with collared shirts, long pants in solid kaki, blue, grey, black or other conservative colors.

Female – long slacks in conservative colors, capris, dresses, culottes, blouses, sweaters, pullovers, polo shirts.

# **APPENDIX: INTERNSHIP** **FORMS**

**BACKGROUND  
NOTIFICATION OF**



**CHECKS  
POLICY**

(Initials in all boxes)

☐ I acknowledge receipt of the background check policy.

☐ I acknowledge that if convictions/charges are documented on the background check reports, it is my responsibility to notify the school/clinical/field facility of these infractions.

☐ I acknowledge my responsibility to make Alvernia University aware of any changes to my record after the initial background check is completed.

☐ I acknowledge that my failure to adhere to the background check policy, or to make the required disclosures to Alvernia University, shall subject me to disciplinary action up to and including dismissal from any academic program in which I am participating and my removal from the University.

☐ I acknowledge that I am aware of the provisions of Act 24 and that certain enumerated convictions result in an individual being prohibited from working in the Pennsylvania Educational System and that the prohibition may be for a period of years or even a lifetime ban from working in the educational field.

\_\_\_\_\_  
Student name printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
signature Student



### CRIMINAL RECORD ACKNOWLEDGEMENT

Department/Program \_\_\_\_\_

Date \_\_\_\_\_

I hereby acknowledge that I have been informed that the presence of a criminal record may preclude my ability to complete the \_\_\_\_\_ Program of Study and may preclude placement into a Fieldwork/Practicum/Clinical Experience, which is required in order to complete this Program of Study.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chair/Program Director

\_\_\_\_\_  
Date



### CRIMINAL RECORD DISCLOSURE

Department/Program: \_\_\_\_\_

Date: \_\_\_\_\_

In accordance with Alvernia University procedures, the presence of a past criminal record must be disclosed by the student to the appropriate personnel at the Fieldwork/Practicum/Clinical site.

I hereby acknowledge that such disclosure has occurred.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chair/Program Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clinical Site

\_\_\_\_\_  
Date



**PHOTOGRAPHIC/ VIDEO RELEASE FOR CLASSROOM TEACHING AND LEARNING**

**Client Name:** \_\_\_\_\_

I, \_\_\_\_\_ or \_\_\_\_\_ parent or guardian of  
\_\_\_\_\_ (client name) hereby agree to allow the use of  
photographs or video of \_\_\_\_\_ (client name) in an Alvernia

University classroom or for the purposes of wheelchair prescription. Video may also include audio sound.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Witness

**Class/Laboratory Name and Number:**

**Purpose of Participation:**

**ALVERNIA UNIVERSITY HEALTHCARE SCIENCE PROGRAM  
REQUEST FOR EMPLOYMENT-BASED FIELD PLACEMENT**

An employment-based field placement option is available for those students who prefer to complete their field placement in an agency setting in which they are currently employed. The curriculum and learning objectives are identical to non-employment-based field placements. Students may choose to continue employment while completing field placement hours with assignments that are distinct from his or her employment responsibilities.

A student who wishes to pursue this option must complete this form in its entirety.

It is the responsibility of the student to submit this form and ensure that the placement meets the following criteria:

- Designated field placement meets the educational objectives & outcomes as identified in course syllabi and field manual
- Fieldwork responsibilities will differ from those of the student's employment responsibilities
- Proposed supervisor is a licensed and/or qualified personnel

**Proposal for an employment-based field placement**

Directions: Complete this proposal and submit it to the Healthcare Science office. DO NOT fax or email your application. Keep a copy for your files. Information should be typed or neatly handwritten.

**Part I: Student Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

**Part II: Agency Information**

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Part III: Employment Information [to be completed by current supervisor]**

Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Student's beginning date of employment: \_\_\_\_\_

Student's current job title: \_\_\_\_\_

Description of current job responsibilities:

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**Part IV: Field Education Information [to be completed by proposed field instructor]**

Field work assignments and the supervision of field work must differ from those associated with the student's employment. The student must demonstrate that the student's employment responsibilities and assignments are separate and distinct from the proposed field assignments. The plan for a field placement must be educationally focused, and not centered solely on agency services.

Proposed Field Placement: \_\_\_\_\_

Proposed Field Instructor: \_\_\_\_\_

Describe the educational opportunities that will meet the learning objectives appropriate for the level and type of field placement. A detailed plan for achieving learning goals will be required as part of the learning contract. See the Field Manual for learning objectives.

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### **Part V: Field Education Review**

The Internship Supervisor will review this proposal to determine if it meets the requirements of Alvernia University's Healthcare Science Program. Contact the Internship Supervisor with any questions or concerns.

Proposal Approved: \_\_\_\_\_

Proposal Not Approved: \_\_\_\_\_

Notes:

\_\_\_\_\_  
Internship Supervisor Signature

Healthcare Science Internship Manual

Alvernia University  
400 Saint Bernardine Street  
Reading, PA 19607  
Healthcare Science Internship  
HCS 441

### **INTERNSHIP AGREEMENT**

Cooperative Education in Healthcare at Alvernia University is designed to assist healthcare science students in integrating their formal classroom learning with the performance expectations of the work world. Alvernia University recognizes that this integration is itself a learning process and therefore, students participating in the program are eligible to receive up to six credits. The awarding of the credits is partly based upon the successful planning, documentation, and evaluation of the student's on-the-job learning. This Employer Agreement is not a formal contract. Rather, it is an agreement outlining the responsibilities of your organization and the Healthcare Science Department at Alvernia University.

1. The supervisor will provide a job description that defines the student's responsibilities and guide the student's progress through the Co-op period.
2. Should any problems develop, the supervisor will inform the Internship Supervisor.
3. The faculty advisor will work to resolve such problems to maintain a good working relationship or terminate the student's continued participation as appropriate. The employer is without obligation to complete the Co-op semester should the student fail to meet expectations. At that time the University will be notified in writing with the reason for termination.

4. The supervisor will agree to write an interim and final evaluation of the student's performance on forms provided by the faculty advisor.
5. The faculty advisor will consult the supervisor for the purpose of student progress and evaluation.
6. If the co-op student is the recipient of a stipend or hourly rate, this agreement does not interfere with the employee/employer relationship. If the co-op student is a non-paying participant in the program, the University assumes no responsibility for the actions of the student in the course of their cooperative opportunity.

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Company

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Phone Number

---

Address

Supervisor Name (printed)

---

Supervisor Signature

Title

---

Date

Student Signature

---

Date

---

Faculty Advisor Signature

---

Date

**Alvernia University**  
Reading, PA  
**MID-TERM EVALUATION FORM**  
HCS 441 Healthcare Science Internship

To the Supervisor:

Since the student had completed half of his/her assignment with you, would you please complete the following evaluation, discuss it with the student and return to me. If you prefer not to discuss the evaluation with the students, please return the employer completed section and return to me:

Thomas Porrazzo, Ph.D., LAT, ATC  
Healthcare Science Program Director  
400 St. Bernardine Street

Reading,  
PA 19607

			Above	
	Poor	Acceptable	Average	Superior
Attendance and dependability				
Communication skills				
Professionalism/Attitude				
Writing Ability				
Planning/Organizing				
Initiative/Drive				

What are the student's strengths:

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In which facets of the job does the student need to improve:

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---

What suggestions have you made to the student to improve his/her performance:

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Any additional comments or explanations:

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Thank you for your time and effort on behalf of this student. If I can assist you in any way, please call Thomas G. Porrazzo at (610) 796-8311 or email [tom.porrazzo@alvernia.edu](mailto:tom.porrazzo@alvernia.edu)

Supervisor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**To the Student:**

Please ask your supervisor to complete this evaluation and discuss it with you. Add your own comments about the evaluation, sign it, and either you or your employer return to me.

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Student Signature

Date \_\_\_\_\_

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Name of Employer

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**Alvernia University**  
Reading, PA  
**FINAL EVALUATION FORM**  
HCS 441 Healthcare Science Internship

Student's Name \_\_\_\_\_

Organization \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Date \_\_\_\_\_

**Part 1, General Performance**

Please circle the appropriate number on the scale below:

1=unacceptable

3=average

5=exceptional performance

Knowledge and understanding of the work environment	1	2	3	4	5
---	---	---	---	---	---

Quantity of acceptable work	1	2	3	4	5
-----------------------------	---	---	---	---	---

Reliability in following through on assignments and instructions	1	2	3	4	5
--	---	---	---	---	---

Neatness and accuracy	1	2	3	4	5
-----------------------	---	---	---	---	---

Attendance	1	2	3	4	5
------------	---	---	---	---	---

Attitude toward work	1	2	3	4	5
----------------------	---	---	---	---	---

Personality: ability to get along with others, tact, sincerity	1	2	3	4	5
--	---	---	---	---	---

Adaptability: ability to handle change and pressure in work environment	1	2	3	4	5
---	---	---	---	---	---

Initiative and drive: ability to set goals and attain them

1      2      3      4      5

Ability to write	1	2	3	4	5
------------------	---	---	---	---	---

General business knowledge base	1	2	3	4	5
---------------------------------	---	---	---	---	---

Ability to edit, spell, punctuate	1	2	3	4	5
-----------------------------------	---	---	---	---	---

Ability to communicate orally	1	2	3	4	5
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## Part 2, Suggestions and Comments

What are the student's strong points?

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What areas need improvement?

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How has the student's job performance changed since the previous evaluation?

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Any additional comments?

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### Part 3, Student Comments on Evaluation

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### Part 4, Signatures

Supervisor\_\_\_\_\_

Student\_\_\_\_\_Date\_\_\_\_\_ **HCS 441**

### SAMPLE JOURNAL ENTRY

#### Working Environment

The work environment at Acme Organization is great! The people are all very friendly and willing to help me out if I have questions. I am in a room with Donna, who has been great, very patient and friendly. Donna is a Penn state grad with a CMA and 5 years' experience. Sandy took me around to meet everyone when I stopped by at the end of last week, so I knew everyone when I came in on Monday. I feel very comfortable here.

Work Successes and Problems

I had to attend a mandatory orientation class put on by the organization in order to get my password and account on the network, Donna has been showing me what my job will be for the fall, and she's been very thoughtful by giving me a little at a time. There are enough things to do that if she were to have given it to me all at once on Monday I wouldn't have been able to handle it! By the end of the week, though, I was familiar enough with the process that I could handle it myself. Donna helps me out if I have questions. I was also able to key in some changes suggested by the department, which gave me a little taste of the magnitude of what they do. This was a good introduction because I can become familiar with the operating systems that they use.

Interesting Observations

I had no idea the scope and depth of this organization was entrenched in so many countries! I suppose on some level I recognized that there had to be an organization to provide companies with global expertise, but it's only when you start working here that you realize the intensity and impact. It is impressive to see how much research is involved in one change or legal interpretation before it is distributed to an employer.

General Lessons Learned

- Use of computer system
- Scope and depth of operation
- The amount of research prior to distribution of changes

**ESTABLISHING THE PROPOSAL****LEARNING OBJECTIVES**

Within the first two weeks of class (depending when the work experience begins), each student is required to submit a proposal for this work experience. This proposal will be developed as a result of the student's career expectations and the nature of the work experience. These inclusive objectives would be based upon what the student expects to gain from the work experience and/or what he/she expects to learn. Content for this proposal should include objectives for the opportunity, both personal and professional, projects, weekly work schedule.

This proposal is the best estimate of what the student wants to accomplish during this work experience. It identifies and adds meaning to work assignments. The proposal will be a useful tool if it includes specific concrete results that will be produced. Using the job description and suggestions from the employer, explain within the proposal a minimum of three objectives stating what is going to be accomplished, how it will be measured, and when it will be completed. The proposal should provide answers to the question: "How can I clearly demonstrate to my supervisor with concrete evidence that I have attained this objective?"

**WEEKLY WORK EXPERIENCE LOG**

STUDENT'S NAME:	SUPERVISOR'S NAME:

TOTAL NUMBER OF HOURS COMPLETED:

Day	Date	Time	Number of Hours
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Supervisor's Initials \_\_\_\_\_

### Course Schedule

The instructor reserves the right to adjust the course requirements and schedule if necessary. Students will be given adequate notification of any alterations.

## Appendix A

**Alvernia University Academic Compliance Regulations**  
**Academic Year 2024 - 2025**

**PENNSYLVANIA STATE POLICE REQUEST FOR CRIMINAL  
RECORD CHECK**

*You may obtain your Pennsylvania Criminal Background Clearance online through the*

*Pennsylvania State Police ePatch website: [Pennsylvania Access to Criminal History - Home \(pa.gov\)](https://epatch.pa.gov)*

In most cases, results will appear instantaneously if no record exists. Online submission requires a credit/debit card payment. **The cost of the clearance is \$22.00.**

In your internet browser, type <https://epatch.pa.gov>

- Scroll to the "Credit Card Users" section and select "Submit a New Record Check." Read the terms and conditions for the use of PATCH.
  - Scroll to the bottom of the page and select "Accept."
- Enter the required Personal information.
  - Under "Reason for Request," use the drop-down menu to select "Employment." ○ Click "Next"
- Personal information Review (verify the information you entered) ○ Click "Proceed"
- Enter all requested information contained on "Record Check Request From." Click "Enter this Request."
- Click "View Queued Record Check Requests (1)"
- Review your Record Check Request information and click "Submit."
- Enter your Payment information and click "Next."
- Verify your payment information and click "Submit."
- Record Check Request Results will appear after being processed.
  - Click "Control #" to view the details of the record check.
- Click "Certification Form" to open a new browser window with the official clearance. Certification document for your records (NOTE: You will **NOT** receive a copy in the mail) ○ Click the printer icon to print a copy of the certificate.

***Upon receipt of your results, present your "Response for Criminal Record Check" certification form to [Academic.compliance@alvernia.edu](mailto:Academic.compliance@alvernia.edu)***

**NOTES:**

My Control #: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

Guide for Academic Compliance: 06/12/2024

Linda Maslar, Academic Compliance Manager

[Academic.Compliance@Alvernia.Edu](mailto:Academic.Compliance@Alvernia.Edu)

## Alvernia University Academic Compliance Regulations

### Academic Year 2024 - 2025

Full Name Submitted Under:

### PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

You may obtain your Child Abuse History Clearance online: [Pennsylvania Child Welfare Information Solution \(state.pa.us\)](https://www.state.pa.us/childwelfare/information/solution) This method is the most expedient in terms of obtaining your results. It requires a credit/debit card payment. **The cost of the clearance is \$13.00.**

- Select “Create Individual Account” (if you have not created an account previously) General information will be shared.
  - Scroll to the bottom of the page and click “Next.”
- Profile information to establish your Keystone Key account will be requested.
  - Enter requested information and click “Finish.”
- Check your email account for your temporary password.
- Log into the Child Welfare Portal again and click “Individual Login.”
- Select “Access My Clearances”
  - Read the website and disclosure information and click “Continue.”
  - Enter your Keystone Key username and password (copy and paste your password from your confirmation email)
  - Click “Login”
- Set your Permanent Password
  - Click “Submit” and then click “Close Window.”
- Log back into the Child Welfare Portal with your new password.
- Review the Terms and Conditions
  - Check the box next to “I have read, fully understand and agree to the My Child Welfare Account Terms and Conditions” and click “Next.”
- Review the Disclosure of Personal information.
  - Click “Continue”
- Click “Create Clearance Application” – Information you will need includes:
  - ADDRESSES FOR PLACES OF RESIDENCE SINCE 1975
  - NAMES OF ALL INDIVIDUALS YOU HAVE RESIDED WITH SINCE 1975, TO INCLUDE PARENTS, GUARDIANS, SIBLINGS, SPOUSES/PARTNERS, ETC.
  - ANY PREVIOUS NAMES YOU HAVE USED OR HAVE BEEN KNOWN BY
  - CREDIT/DEBIT CARD INFORMATION FOR THE \$13.00 CLEARANCE FEE
- Click “Begin” at the bottom of the page.

Guide for Academic Compliance: 06/12/2024

Linda Maslar, Academic Compliance Manager

[Academic.Compliance@Alvernia.Edu](mailto:Academic.Compliance@Alvernia.Edu)

## **Alvernia University Academic Compliance Regulations**

### **Academic Year 2024 - 2025**

- On the Application Purpose page, select “Individual 14 years of age or older who is applying for or holding a paid position” and click “Next.”
- Enter your Applicant and Contact information.
  - Scroll down to the bottom of the page and click “Next.”
- Enter Current Address, Mailing Address, and Certificate Delivery Method and click “Next.”
- Add Previous Addresses and click “Next.”
- Add all Current and previous Household Members and click “Next.”
- Review your “Application Summary” and click “Next.” • Enter your Application Payment and click “Next.”
- Enter your eSignature.
  - Check the box certifying that the information is correct. ○ Enter your first and last name in the signature box and click “Next.”
- Application Payment ○ Select “No” to question posed and you will be prompted to Make a Payment
- Click “Make a Payment” ○ Enter your credit/debit card information. ○ Scroll to bottom of the page and click “Pay Now.”
- Payment Completed
  - Click “Finalize and Submit Application”
- You will be prompted to check your email for a confirmation notification.
  - You may log in to view or check the status of your application from the “PA Child Abuse History Clearance Account” at any time.
  - Once your application has been finalized, you will receive an email to log in to your account and view/print the outcome/ clearance results.
  - If you do not receive an email within 30 days of submission, contact the ChildLine and Abuse Registry’s Child Abuse History Clearance Unit at 1-877-371-5422

***Upon receipt of your results, present your clearance certificate to:  
academic.compliance@alvernia.edu***

## **Alvernia University Academic Compliance Regulations** **Academic Year 2024 - 2025**

**NOTES:**

Keystone Key ID: \_\_\_\_\_

Password: \_\_\_\_\_

### **FBI FEDERAL CRIMINAL HISTORY CLEARANCE**

**ALL students applying for internships, practicums, fieldwork or clinicals within designated major and Alvernia University are required to obtain Federal Criminal History Record. Students must follow the following procedures.**

The fingerprint-based background check is a multiple-step process, as follows:

1. **Registration – The applicant must register prior to going to the fingerprint site.** Walk-in service is allowed but all applicants are required to complete pre-enrollment in the Universal Enrollment system.

Pre-enrollment can be completed online or over the phone. The registration website is available online 24 hours/day, seven days per week at <https://uenroll.identogo.com> Telephonic registration is available at 1-844-321-2010, Monday through Friday, 8 am. To 6 pm EST. During the pre-enrollment process, all demographic data for the applicant is collected (name, address, etc.) along with notices about identification requirements and other essential information.

When registering online, an applicant must use the appropriate agency specific Service Code to ensure they are processed for the correct agency and/or applicant type. Using the correct service code ensures the background check is submitted for the correct purpose. Fingerprint requests processed through any other agency or purpose cannot be accepted and are not transferrable. If an applicant enters the wrong code by mistake, the incorrect applicant type will appear at the top of the screen. The applicant should select the “Back to Home” button and begin the process again, by reentering the correct Service Code. If the applicant proceeds with the process under the incorrect code, the pre-enrollment and/or results cannot

Guide for Academic Compliance: 06/12/2024

Linda Maslar, Academic Compliance Manager

[Academic.Compliance@Alvernia.Edu](mailto:Academic.Compliance@Alvernia.Edu)

## **Alvernia University Academic Compliance Regulations**

### **Academic Year 2024 - 2025**

be transferred to another state agency and the applicant will have to start the process over and pay for the background check again.

2. **Codes** – to follow according to major and site if applicable.
3. **Payment** – **The applicant will pay a fee of \$26.20** for the fingerprint service and to secure an unofficial copy of the Criminal History Record. If using a Credit Card, the person who is named on the card must be present for the signature. No cash transactions or personal checks are allowed.
4. **Fingerprint Locations** - During the pre-enrollment process, an applicant must select a fingerprint site of their choice. The system will prompt the applicant to select a date/time to be fingerprinted or they may select “walk-in,” If choosing “walk-in” please note that scheduled appointments take priority.

After the registration process is completed, the applicant proceeds to the fingerprint site of their choice for fingerprinting. The location of the fingerprint sites and days and houses of operation for each site are posted.

5. **Fingerprinting** – At the fingerprint site the Enrollment Agent (EA) Manages the fingerprint collection process. The fingerprint transaction begins when the EA reviews the applicant’s qualified State or Federal photo ID before processing the applicant’s transaction. A list of approved ID types is listed during application. **Applicants will not be processed if they cannot produce an acceptable photo ID.** After the identity of the applicant has been established, all ten fingers are scanned to complete the process.
6. **Applicants** – Will receive an unofficial copy of the report via email. This email can only be opened once, be prepared to print/save the document. If closed prior to saving you will need to wait for the formal copy to come in the mail. The email is from **PA Safe**.
7. **Inquires** – More information regarding fingerprinting locations and the process for obtaining an FBI fingerprint-based background check report may be found at:  
<https://uenroll.identogo.com>

**Fingerprint Services Customer Service Call Center: 1-844-321-2101**

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**Frequently Asked Questions:**

<https://www.identogo.com/locations/pennsylvania>

Email with questions to: [academic.compliance@alvernia.edu](mailto:academic.compliance@alvernia.edu)

Linda Maslar, Academic Compliance Coordinator

BH 113

610-796-8258

***Upon receipt of your results, present your clearance certificate to:***  
***academic.compliance@alvernia.edu***

**NOTES:**

Appt. Date & Time: \_\_\_\_\_

Location: \_\_\_\_\_

CODE used: \_\_\_\_\_

**SERVICE CODES**

<b>DEPT OF HUMAN SERVICES: Code: 1KG756</b>	<b>MAJORS INCLUDED:</b>
Employer: Alvernia University 400 Saint Bernardine Street, Reading, PA 19607	AMH, AT, BIO, BSW, BUS, CJ, COM, DNP, DPT, HCS, MACC, MSW, NUR, MSOT, PA, POS, PSY, SCI
<b>EXCEPTIONS:</b>  <b>*****PA MAJORS ON SUPPLY FBI FOR MATRICULATION</b>	<b>SEE CODES BELOW IF GOING TO A SCHOOL DISTRICT</b>

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Linda Maslar, Academic Compliance Manager

[Academic.Compliance@Alvernia.Edu](mailto:Academic.Compliance@Alvernia.Edu)

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<b>EXCEPTIONS:</b>	AT, DPT, OT – (St. Luke’s) 1KG756 (verified)
	AT, DPT, OT – (Wellspan) 1KG756 (verified)
	OT – IM ABLE - 1KG756 (verified), PTS School District – 1KG6XN (verified)
<b>DEPT OF AGING: Code: 1KG8RJ</b>  <b>Facility I/D: 14537 (Alvernia University))</b> <b>Position type:</b> <b>Students/Trainees</b> <b>Position applied for: Students/Trainees</b>	<b>**Lehigh Valley Hospital/satellite locations: <u>ANY</u> major <u>AND</u> a non-resident of PA must do Dept of Aging</b>
<b>Dept of Education – Code 1KG6RT</b>  <u><b>EDU EXCEPTIONS:</b></u> <u><b>MUHLENBURG SD</b></u>	<b>Education majors &amp; PhD students</b>  <u><b>MUST PROVIDE UPDATE YRLY. OF ALL CLEARANCES</b></u>
<b>Code 1KG6XN</b>	<b>AT and OT students going to school district</b>
<b>Code 1KG6XN</b> ← →	<u><b>ANY MAJOR (EXCEPT EDUCATION)</b></u> <b>GOING TO A SCHOOL DISTRICT NORMALLY REQUIRE DEPT OF EDUCATION CODE. STUDENT SHOULD ASK SITE.</b>
<b>International Students</b>	<b>Use passport for I/D</b>

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	Citizenship Page – Use F1 for NonImmigrant VISA/Status
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*Upon receipt of your results, present your clearance certificate to:*  
[academic.compliance@alvernia.edu](mailto:academic.compliance@alvernia.edu)

**CERTIFICATION REQUIREMENTS**

APPLIED TO	REQUIREMENT	FREQUENCY	HOW TO PROCEED
NURSING	RQI SYSTEM-classroom	Maintained during time in program	<b>Certifications MUST demonstrate skills: therefore, online only courses are NOT accepted</b>  Accepted courses: blended course-online training/classroom testing, choose appropriate class below according to major.
ATHLETIC TRAINING	CPR w/curriculum		
PHYSICAL THERAPY	Basic Life support for the Healthcare Professional		
OCCUPATIONAL THERAPY	COURSE MUST INCLUDE FIRST AID		
PHYSICIAN ASSOCIATE	CPR w/curriculum		

• **DPT** - Basic Life Support for the Healthcare Professional by the AHA

• **OT** - Adult & Pediatric First Aide/CPR/AED-BL by American Red Cross

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## Alvernia University Academic Compliance Regulations

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- Adult & Pediatric CPR/AED & First Aid for Healthcare Providers by American Red Cross

○ American Red Cross: [Search | Classes, Products, Articles | Red Cross](#) ○  
American Heart Association: [Basic Life Support \(BLS\) Course Options | American Heart Association CPR & First Aid](#) ○ RACC and emergency responder organizations (fire department, ambulance, police) often have a CPR course open to the public.

**ALL STUDENTS:** ADDITIONAL Field of Study requirements may be needed according to placement site in either clearances, trainings or health depending on affiliation agreement.

**ALL** Alvernia University requirements MUST be met in addition to the placement requirements.

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**TRAINING REQUIREMENTS**

APPLIES TO	REQUIREMENT	FREQUENCY
AT, DPT, EDU, OT, PA	ACT 126 – Mandated Recognizing and Reporting Child Abuse	Completed one time before start of first clinical/fieldwork.
1. Access online at: <a href="https://www.reportabusepa.pitt.edu">https://www.reportabusepa.pitt.edu</a>		
2. If you have not previously registered: click on the “Registration” link at the top of the page		
3. Make sure to complete all fields		
4. Refer to the frequently asked questions (FAQ) section after login		
5. Expect to spend approximately 3 hours completing the entire program and quizzes. The program allows for you to take a break and come back to complete the course at another time.		
6. Once the course is complete, save/print the certificate. Send the certificate to: <a href="mailto:academic.compliance@alvernia.edu">academic.compliance@alvernia.edu</a>		
DPT follows class assignment		

**ALL Students:** **ADDITIONAL Field of Study requirements may be needed according** to placement site in either clearances, trainings or health depending on affiliation agreement.

**ALL** Alvernia University requirements **MUST** be met in addition to the **placement requirement.**

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**EDUCATION INTERFACE TRAININGS**

APPLIES TO	COURSES	HOW TO PROCEED
AT, DPT, HCS, NUR, OT, PA All trainings	HIPAA Compliance Fire Safety Infection Control Bloodborne Infections Electrical Safety Lifting to Prevent Injury Covid 19 Precautions	All required majors must complete training modules. You will be sent an email from Academic Compliance with a username, password, and instructions. Training will vary according to major and completed once. Once you receive the email containing username, password, and instruction you will be able to log in.

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AMH, PSY, BSW, MSW	HIPAA Compliance	<a href="#">Education Interface Log In   Online Courses</a>  Complete all training modules that are in you. Which is designated in your online "Classroom ."
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**ALL Students:** **ADDITIONAL Field of Study requirements may be needed according** to placement site in either clearances, trainings or health depending on affiliation agreement.

**ALL** Alvernia University requirements **MUST** be met in addition to the placement requirements.

**Undergraduate Immunization Requirements**

**POLICY**

It is the policy of Alvernia University to require all full-time undergraduate degree seeking students to provide record of childhood immunizations. In addition, graduate students residing in campus housing must also comply with the following health requirements.

Vaccination requirements may vary for both undergraduate and graduate students who participate in off-campus educational experiences. These additional requirements are detailed in the program of study's student

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# **Alvernia University Academic Compliance Regulations**

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handbook or defined by the experiential learning site. It is the student's responsibility to confirm compliance with those requirements before the start of the off-campus educational experience.

### **PURPOSE**

Alvernia University's Undergraduate Immunization Policy has been established to protect the health and well-being of the entire campus community.

### **PROCEDURE**

Alvernia University students will access the immunization requirements by completing the Alvernia Immunization History form on the Student Health Portal and attaching an image or copy of their immunization record from their medical provider, high school nurse, or previous higher education institution.

Compliance with the University's immunization requirements will be determined by Alvernia University student health center administration. Any student not compliant with the requirements may have a health stop placed on their student record until they have completed the required immunizations. In addition, residential students may have their keys withheld and/or access to their residential hall removed.

### **REQUIREMENTS**

1. Measles, Mumps, Rubella (MMR)
  - a. Documentation of two (2) doses administered after 12 months of age and dated at least 28 days apart, OR
  - b. Results from a blood test confirming immunity to measles, mumps, and rubella.
2. Varicella
  - a. Documentation of two (2) doses administered after 12 months of age and dated at least 28 days apart OR
  - b. Documentation of a history of the disease (chicken pox) OR
  - c. Results from a blood test confirming immunity to varicella (completed vaccination series or blood test are required for health care programs)
3. Tetanus, Diphtheria, Pertussis (Tdap)

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- a. Documentation of one (1) dose of Tdap administered after age 10.
- 4. Hepatitis B
  - a. Documentation of a series of three (3) age-appropriate doses of the hepatitis B vaccine. Minimum interval between doses is 4 weeks between the first and second dose, 8 weeks between the second and third dose, and at least 16 weeks between the first and third dose OR
  - b. Documentation of two (2) adult doses may be provided if the student was vaccinated between 11-15 years of age, with the second dose given 4-6 months after the first OR
  - c. Request consideration of alternative catch up schedule approved by the Centers for Disease Control and Prevention (CDC) OR
  - d. Results from a blood test confirming immunity to Hepatitis B (Hep B surface antibody test)
- 5. Meningococcal Quadrivalent ACWY
  - a. Documentation of the meningococcal quadrivalent conjugate vaccine administered after 16 years of age. If the initial dose was given prior to age 16, a booster dose must be documented OR
  - b. The student may sign a waiver declining the meningitis vaccine in accordance with Pennsylvania state law.
    - i. Pennsylvania State Law requires all college students must provide documentation of a valid meningitis vaccine as above or a signed waiver declining the vaccine to reside on campus.
- 6. The following vaccinations are strongly recommended:
  - a. COVID-19
    - i. Primary series (if prior to 4/19/23) and/or Bivalent COVID Vaccine
  - b. Hepatitis A
    - i. Documentation of a series of three (2) ageappropriate doses of the hepatitis A vaccine.
  - c. Meningitis B
    - i. Documentation of a series of three (2 or 3) ageappropriate doses of the meningitis B vaccine.
  - d. Influenza
    - i. Documentation of one seasonal influenza vaccine, annually.
- 7. Alvernia University students may request an exemption from the University's immunization requirements for the following reasons:
  - a. Medical Exemption

## **Alvernia University Academic Compliance Regulations**

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- i. Students may request a medical exemption from a specific vaccination if a licensed physician, physician's associate/assistant, or nurse practitioner provides a signed written statement that vaccination may be detrimental to the health of the student, with the reason for this determination.
    - ii. When the healthcare provider determines that vaccination is no longer detrimental to the student's health, the student is required to complete the vaccination.
  - b. Religious Exemption
    - i. Students may request religious exemption from a specific vaccine if the student objects in writing to the vaccination on religious grounds or on the basis of a strong moral or ethical conviction similar to religious belief.
  - c. Process
    - i. Student requests a Vaccine Exemption form by sending a message to Penn Medicine - Alvernia Medical and Counseling Center through the Student Health Portal requesting the form to be added to their record.
    - ii. Administration at the Penn Medicine - Alvernia Medical and Counseling Center will add the form to the student's electronic health record.
    - iii. Student must complete the vaccination exemption form, attach an image of the appropriate supporting documentation to the form, sign, and submit the form through the Student Health Portal.
    - iv. A medical provider of the Penn Medicine - Alvernia Medical and Counseling Center will review the request and determine if the student is eligible for the exemption.

**ADDITIONAL FIELD OF STUDY REQUIREMENTS (includes those students participating in internships as sites categorized as "Education" or "Healthcare" OR site affiliation agreement dictates need for additional requirements)**

# **Alvernia University Academic Compliance Regulations**

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**\*\* ALL UNDERGRADUATE AND GRADUATE STUDENTS IN THE PROGRAMS LISTED BELOW MUST ALSO MEET THE UNDERGRADUATE REQUIREMENTS LISTED ABOVE TO FULFILL HEALTH REQUIREMENT COMPLIANCE\*\***

1) Education

- a) Tuberculosis testing prior to the start of the student teaching/observation experience with PPD skin test or blood test (QuantiFERON TB gold or TSpot). Testing must occur no earlier than 3 months prior to matriculation.

2) School of Health Sciences

- a) The following vaccines are required. Exemptions may be requested per the policy above (#7 under "Requirements") and may impact the educational experience.

- i) COVID-19 vaccine - Primary series (if prior to 4/19/23) and/or Bivalent COVID Vaccine ii) Influenza - one seasonal influenza vaccine, annually.

- b) The following blood tests or forms are required.

- i) Hepatitis B - Results from a blood test confirming immunity to Hepatitis B (Hep B surface antibody test) OR completed declination form.
- ii) Varicella – Results from a blood test confirming immunity to Varicella IF 2 Varicella vaccines are not documented.
- iii) Pneumovax vaccine OR completed declination form.

- c) Annual physical exam

- d) Urine drug screen at the start of each semester (fall and spring) - see separate drug screen policy.

- e) Tuberculosis testing annually – testing may be skin testing (PPD) or blood test (QuantiFERON TB Gold or Tspot)

- i) QuantiFERON / Tspot – one test required annually
- ii) Skin Test / PPD – to be compliant for tuberculosis record must include.

(1) One test within the past year (365 days) **and**

(2) One test within the past 2 years

(730 days) (PPD or QuantiFERON/Tspot)

**OR**

(3) Initial requirement may be met with a 2-step TB test within the past years (two tests placed 7-21

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days apart) followed by an annual single step test.

**Alvernia University**  
**400 St. Bernardine St., Reading, PA. 19607**  
**WAIVER AND RELEASE FROM**  
**LIABILITY**

On behalf of myself, or in my capacity as the parent/guardian of the participating minor, and INTENDING TO BE LEGALLY BOUND, the undersigned hereby releases Alvernia University, its agents, officers and employees from all responsibility and any liability for any injuries, illness and/or loss which may result from or arise out of, or be connected with any participation in the University's program known as: \_\_\_\_  
\_\_\_\_\_(course or program) for the academic year(s) of \_\_\_\_\_.

This Release extends and applies to, and also covers and includes, all unknown, unforeseen, unanticipated, and unsuspected injuries, damages, loss and liability, and the consequences thereof. The provisions of any State, Federal, Local or Territorial law or statute providing in substance that releases shall not extend to claims, demands which are unknown or unsuspected to exist at the time, to the person executing such release, are hereby expressly waived.

In signing this release, I acknowledge that any travel may be dangerous and may result in harm to me and my property. I voluntarily accept and assume these risks and dangers and release Alvernia University from all responsibility and any liability for any injuries and/or damages which may result from my decision to participate in this program,

I further promise, covenant and agree not to bring, commence, prosecute or maintain, or cause or permit to be brought, commenced, prosecuted or maintained, any suit or action, either at law or in equity, in any court in the United States, or in any State thereof, or elsewhere, against Alvernia University, its agents, officers and/or employees for personal injury, property damage or any other type of loss, arising out of, or in any way connected with my participation in said program.

I also agree to indemnify and hold harmless Alvernia University, its agents, officers and employees from all liability, claims, demands and damage or cost arising out of my participation in said program.

I authorize university personnel or representatives to approve emergency medical treatment for myself in the event of injury or illness during my participation in the program. I represent and warrant that I am and will be covered throughout the program by a policy of comprehensive health and accident insurance which provides coverage for injuries and illnesses I sustain or experience while in the program and, more specifically, in the countries in which I will be living and/or traveling while on the program.

I understand and agree that this release is binding on me and my heirs, executors, administrators, personal representatives and next-of-kin. My signature denotes my understanding of an agreement with this statement and its implications.

I agree that this document shall be interpreted and governed by the laws of the Commonwealth of Pennsylvania.

I agree that if any provision of this document shall for any reason be held invalid or unenforceable, such invalidity or unenforceability shall not affect any other provision of this document.

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Linda Maslar, Academic Compliance Manager

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IN WITNESS WHEREOF, intending to be legally  
bound, I have hereunto set my hand this       day of

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

IN  
WITNESS  
intending to  
be legally  
bound, I  
have  
hereunto set  
my hand this  
     day  
of

\_\_\_\_\_

Witnessed By

Print Name of Minor Participant

\_\_\_\_\_  
Signature of Program Participant or Parent/Guardian of  
minor

**Emergency Information**

\_\_\_\_\_  
Printed Name of Participant or Parent/Guardian of minor

(Who to Contact in Case of Emergency)

(City and State)

(Relationship)

(Phone Number)

Updated 9/9, 9/04/07

Guide for Academic Compliance: 06/12/2024

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