

## Student Acknowledgement of Risk

DATE:					
STUDE	NT NAME:				
You ha	ve been placed with(si	La Na va V	_ to complete your _	(Course Number	course.
Please	acknowledge that you understarrisks associated with participating	nd that there is	a global COVID-19 p	andemic and t	hat there are
	I understand the hazards of the for Disease Control and Preven understand that the circumstar accordingly, the CDC guidelines responsibility for familiarizing in Notwithstanding the risks associated willingly choose to participate	tion ("CDC") gu nces regarding C are regularly m myself with the ciated with COV	idelines regarding C OVID-19 are changi odified and updated most recent updated ID-19, which I readil	COVID-19. I ack ng from day to d, and I accept s. y acknowledge	nowledge and day and that, full
Please	also acknowledge that you inter	d to adhere to	these CDC guideline	s:	
2. 3.	cleaning high touch surfaces, as Stay home if you or any others	ore entering the including frequency of physical distance with whom you ipment as require	workplace if requirent handwashing, avencing. come in contact dered, including but no	ed. oiding touching	g your face, ns of illness.
opport	event the University of Kentucky cunity to continue in your placem both agree to	ent at the continued	placement. Your de	should you an	d nue in your
	nent withagreement.	constitutes a	a continued acknow	ledgement of r	isk as defined
STUDE	NT SIGNATURE:				