ESAP ONLINE PROGRAM PARTICIPANT AGREEMENT

I, ________________________, am a participant in the Engineering Summer Academy at Penn online summer program presented by the University of Pennsylvania, being held from July 12, 2021 to July 30, 2021.

As a condition of my participation in this program, I agree to and understand the following:

1. I will abide by these rules and any program rules. As a parent or guardian, I will ensure that my child follows these rules and program rules. I will attend virtual program activities as required.

2. I understand that all lectures and office hour sessions will be delivered via the Zoom video communications platform. I have had a chance to review their privacy policy: https://zoom.us/privacy

3. I will abide fully by the University of Pennsylvania’s Code of Conduct and Code of Academic Integrity and abide by all laws and other relevant legal conditions surrounding the program as found at: https://catalog.upenn.edu/pennbook/code-of-student-conduct/ https://catalog.upenn.edu/pennbook/code-of-academic-integrity/

4. I understand the possession, use, consumption, or sale of any drug (including cigarettes and alcohol, but not including prescribed medication if used as prescribed) is strictly prohibited and a criminal act under United States law. I agree not to depict any use or consumption of drugs or alcohol in any virtual setting.

5. I will not photograph or record the image or sound of any program session or any other participant at any time.

6. I will attend virtual program activities as required.

7. I will treat each person in the program with courtesy and respect, including respect for privacy. Bullying, hazing, and threatening, abusive, or harassing behavior or language are strictly forbidden, whether on campus, in a virtual program setting, or through other means of communication, such as text messages, chat, etc.

8. I will respect University personnel and act responsibly online.

9. I understand that all sexual and/or pornographic activity or communication is strictly forbidden.

10. I understand the possession, use, handling, or sale of any type of weapon is strictly prohibited. I understand that I must immediately notify my program director or security liaison should I become aware of another student having possession of a weapon.
I have carefully read and understand this agreement. I have had the opportunity to ask any questions I may have about the program and the rules I am hereby agreeing to follow. I understand that if I fail to abide by any of the conditions in this agreement, I may be suspended or dismissed from the program immediately.

Student Signature: ____________________________  Date: ________________

Parent/Guardian Signature: ______________________  Date: ________________

*Parent/Guardian signature not required if participant is 18 or older.