

## COMMUNITY ENGAGEMENT AND CICM ADVOCACIES

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## **Certificate of Personal Waiver**

1,	(employee's name), of legal age, with residence at
	(employee's address), do hereby certify that I am joining the
	(CECA Activity) which will be held in
	(location of the activity) On (date of activity)
under t	the following conditions:
1.	This activity has been organized by the University thru the CECA Office with best attention for my
	safety and security during the travel and the activity proper.
2.	As such, I will join and abide by the following instructions:
۷.	
	a. To observe the departure time from USL and departure time from the venue of the CECA
	activity as per schedule and only through the vehicles provided by the school.
	b. To refrain from any personal activity that may veer me away from the activity.

- e. Use of my personal vehicle is my personal accountability.
- 3. That I shall assume responsibility and thereby waive any responsibility for University of Saint Louis or any of its staff for any untoward incident that may happen due to my own fault or negligence.

d. To comply with other rules or instructions for security and safety during the travel and

c. To ascertain that I am physically and mentally fit to attend the CECA activity.

I further certify that below is my true and correct signature.

throughout the activity.

_	(Employee's Signature over Printed Name)
D	ate Accomplished: