



NUin Canada- Fall 2017 Registration Instructions & Forms

General Instructions:

- Please complete all the steps outlined below before submitting your registration documentation
- If you have not attended or taken any courses at McGill University before, do not write anything in the section marked "STUDENT NO." on all forms.

STEP 1 –Registration Form

- Please proceed to complete the Registration Form by clearly filling out your information in as many of the fields that apply to you as possible.
- Course Selection: Please review that the courses listed are indeed the ones you wish to take during your NUin Canada Fall 2017 program.
- At the bottom right corner of the Registration Form, please ensure that you sign your name on the first line marked "STUDENT'S SIGNATURE/SIGNATURE DE L'ETUDIANT(E)", and indicate the date next to your signature.

STEP 2 – Permanent Code Data Form

- Please complete the Permanent Code Data Form provided.
- If you have attended High School and/or CEGEP in Quebec, please indicate your Permanent Code in Box #1.
- If you did not attend High School and/or CEGEP in Quebec, do not complete Box #1.
- Please proceed to complete all the required information on the form.
- If you do not have a McGill University Student ID Number, you do not need to write anything in Box #2.
- At the bottom of the page, please ensure that you have signed your name in the box indicated "SIGNATURE"



STEP 3 – Required Legal Documentation

- Please include a clear photocopy of the Photo Page of your Passport. Note: Upon your arrival, we will require a copy of the page stamped in your passport at the point of entry into Canada.
- Electronic Travel Document (**online**): Starting March 15, 2016, visa-exempt foreign nationals who study in Canada for less than 6 months will need an Electronic Travel Authorization (eTA). Exceptions include U.S. citizens and students with a valid visa. The Electronic Travel Authorization (eTA) is completed online. Please visit [eTA application page](#)

Note regarding Visas: It is possible that you might need a visitor's visa issued by Citizenship and Immigration Canada at the point of entry into Canada. To find out if you require such a visa, please visit [Citizenship and Immigration Canada](#).

STEP 4 – Consent for Release of Official Documents and Sharing of Information

- Please complete the form entitled « Consent for Release of Official Documents and Sharing of Information » so that we may have your consent to order your transcript on your behalf and communicate with your home university about your academic, financial and disciplinary records during your studies at McGill.

Reminder: sign and date the student's signature section. Please note that if you are under 18 years old, your parent or legal guardian must also sign the form.

STEP 5 – Guardianship Form (**to complete only if you are under 18 years old**)

- Please complete the form entitled « Guardianship Form » and have your parent(s) or legal guardian(s) fill out the needed information and sign the form so that we may have yours and your parent(s)/ guardian(s) consent to contact them in case of emergency.
- Please have your parent(s)/ guardian(s) complete the appropriate sections (Signature and Emergency Contact Information) on the form

STEP 6 – Short Term Residence Responsibility Form

- Please fill out the requested student information on the form entitled « Short Term Residence Responsibility Form » and sign and date the student's signature section.
- Please note that if you are under 18 years old, your parent or legal guardian must also sign the form.



STEP 7 – Volunteering – Rules of Engagement

- Please read the rules of engagement on the Rules of Engagement Volunteering Form and sign and date the form.
- Please note that if you are under 18 years old, your parent or legal guardian must also sign the form.

**PLEASE PRINT / REMPLIR LE FORMULAIRE EN MAJUSCULES**

IF YOU HAVE ATTENDED MCGILL BEFORE, INDICATE YOUR STUDENT NUMBER. SI VOUS AVEZ DÉJÀ FRÉQUENTÉ MCGILL, INDIQUEZ VOTRE NUMÉRO MATRICULE.

STUDENT NO. N° MATRICULE		STUDENT NAME NOM DE L'ÉTUDIANT/E	
DATE OF BIRTH DATE DE NAISSANCE		CANADIAN SOCIAL INSURANCE NO. N° D'ASSURANCE SOCIALE CANADIEN	
HOME ADDRESS: If the same as mailing address check (✓) here: ADRESSE PERMANENTE: si l'adresse postale est la même, cochez (✓) ici : <input type="checkbox"/>		MAILING ADDRESS (Please specify a local address for correspondence during your studies at McGill) ADRESSE POSTALE (Indiquez une adresse locale pour la correspondance pendant vos études à McGill)	
STREET NUMBER, STREET NAME / N° RUE, RUE		STREET NUMBER, STREET NAME / N° RUE, RUE	
CITY / VILLE		CITY / VILLE	
PROVINCE / STATE / COUNTRY		PROVINCE / STATE / COUNTRY	
HOME TELEPHONE NO. N° DE TÉL. À DOMICILE		EMAIL COURRIEL	
MOTHER TONGUE LANGUE MATERNELLE		PRINCIPAL LANGUAGE USED LANGUE D'USAGE	
MOBILE TELEPHONE NO. N° DE TÉL. MOBILE		SEX SEXE	
HIGHEST LEVEL OF EDUCATION COMPLETED CHECK ONE (✓) ONLY PLUS HAUT NIVEAU D'ÉTUDES COMPLÉTÉ NE COCHEZ (✓) QU'UNE SEUL CASE		TECH. VOC. FORMATION TECH. <input type="checkbox"/> 3 NON UNIV. PROFESSIONAL FORMATION PROFESSIONNELLE <input type="checkbox"/> 5 UNDERGRADUATE DEGREE DIPLOME DE 1 ^{ER} CYCLE <input type="checkbox"/> 6 GRADUATE DEGREE DIPLOME DE 2 ^E / 3 ^E CYCLE <input type="checkbox"/> 7	
COMPULSORY COURSES			
McGill Course Title and Code		NEU Equivalent Course Title and Code	
The Global Experience; YCBU N25		The Global Experience	
Introduction to the Study of Canada; CANS 200 001 CRN 22354		INSH 1990: Interdisciplinary Elective: Social Sciences & Humanities	
Critical Analysis and Composition; CEAP 150		ENGW 1111: First Year Writing	
Survey of Basic Mathematics 1; CMSC 203		MATH 1231: Calculus for Business and Economics	
Microeconomics; ECON 208 004 CRN 23007		ECON 1116: Microeconomics	
		SIGNATURE	
		DATE	

By signing, I hereby acknowledge that I am bound by and undertake to observe the statutes, rules, regulations and policies in place from time to time at McGill University and of the Faculty or Faculties in which I am registered, including those policies contained in the University calendars and other official documents. I understand that my obligations as a student commence with my registration and terminate in accordance with the university's statutes, regulations and policies. I certify that the information submitted on my application form is complete and correct at the time of submission, including my declaration of citizenship and immigration status, which I may be required to document. I agree to provide proof of eligibility in order to be assessed Canadian fees. Further, I understand that misrepresentation of any information may result in my admission to, or registration in, the university being rescinded. I recognize that a McGill student identity card is required for access to services. I understand that my likeness and signature will be captured in order to produce the card and stored for subsequent identification. I am aware of those provisions of Quebec Law concerning the protection of personal information including the right to correct my record and agree to the release of nominative information as indicated on the reverse of the present form. This agreement is governed by the laws of the province of Quebec.

En signant, je reconnais par la présente être lié(e) aux lois, règlements et politiques de l'Université McGill, de la faculté ou des facultés auxquelles je suis inscrit(e) ainsi qu'aux politiques mentionnées dans les annuaires de l'Université et autres documents officiels, et je m'engage à les respecter. Il est entendu que mes obligations à titre d'étudiant(e) débutent lors de mon inscription et prennent fin conformément aux dispositions des lois, règlements et politiques de l'Université. Je certifie par la présente que les renseignements figurant sur mon formulaire de demande d'admission sont complets et exacts au moment de la demande, y compris la déclaration de citoyenneté et de statut d'immigrant que je me tiens prêt(e) à justifier au besoin. Je m'engage à fournir une preuve d'admissibilité aux droits de scolarité canadiens. Il est entendu, par ailleurs, que tout faux renseignement peut entraîner la résiliation de mon admission ou de mon inscription à l'Université. Je sais que la carte d'étudiant de McGill est exigée pour avoir accès aux services. Je sais que la préparation de cette carte d'identité nécessitera la prise de mon portrait et de ma signature, qui seront mémorisées pour fins d'identification ultérieure. Je connais les dispositions de la loi du Québec concernant la protection des renseignements personnels, et notamment le droit qui m'est reconnu de faire corriger mon dossier. Je consens à la divulgation de renseignements à mon égard qui figurent au verso du présent document. Cette convention est régie par les lois de la province de Québec.

PROTECTION OF PERSONAL INFORMATION

BILL 65: The Act Respecting Access to Information Held by Public Bodies and the Protection of Personal Information.

Personal information is protected by legislation in the Province of Quebec. The provisions of this statute are such that discussion about a student's application file, or access to that file, is restricted to the applicant involved. Other persons or organizations can have access to information pertaining to a student's application only if the student has provided the School of Continuing Studies with written authorization which specifies both to whom information can be given and the type of information which can be released.

Certain information gathered by the University about an applicant or student will be released to the following bodies upon their request:

- a) the Student Association recognized by McGill University
- b) the McGill Alumni Association
- c) the school(s) or college(s) which the student attended
- d) the appropriate authorities involved with the external or internal funding of fees
- e) the professional bodies or corporations (e.g., engineers, dentists).

A student may oppose the release of information to those named above by completing an opposition form at the Registrar's Office.

Officers and members of the University staff (e.g. Faculty officers, Office of the Dean of Students, etc.) may also have access to relevant parts of such records for recognized and legitimate use.

PROTECTION DE LA VIE PRIVÉE DES RENSEIGNEMENTS PERSONNELS

LOI 65: Loi protégeant l'accès aux informations détenues par des organismes publics et la protection de la vie privée.

Les renseignements personnels sont protégés par une loi adoptée par la province de Québec. En vertu de cette législation, seul le candidat concerné a le droit de discuter de son dossier d'inscription ou d'avoir accès à ce dernier. Les données relatives au dossier de candidature d'un étudiant ne sont accessibles à d'autres personnes ou organismes que si l'étudiant a remis à l'École d'éducation permanente une autorisation écrite précisant les personnes et organisations à qui ces données peuvent être divulguées.

Certaines données recueillies par l'Université sur un candidat ou un étudiant peuvent être divulguées aux organismes suivants à leur demande:

- a) les associations d'étudiants reconnues par l'Université McGill
- b) l'Association des anciens étudiants de l'Université McGill
- c) les écoles ou collèges que l'étudiant a fréquentés
- d) les instances compétentes qui acquittent les droits de scolarité
- e) les associations ou corporations professionnelles (par exemple d'ingénieurs, de dentistes).

Un étudiant peut s'opposer à la divulgation d'informations aux personnes nommées ci-dessus en remplissant un formulaire d'opposition au Registrariat.

Les agents et membres du personnel de l'Université (par exemple, les agents des facultés, le bureau du doyen des services aux étudiants, etc.) peuvent aussi avoir accès aux parties pertinentes des dossiers en vue d'une utilisation reconnue et légitime.



PERMANENT CODE DATA FORM

Please complete this form in block letters. S'il vous plaît remplissez ce formulaire en lettres moulées.

1 Permanent Code/Code Permanent (Please indicate here your Permanent Code if you have one/Veuillez nous indiquer votre code permanent si vous en possédez un)

If you provided your permanent code in section [1] above, you need to provide a document that has the permanent code pre-printed such as CEGEP transcript or a Québec financial aid document. Si vous avez fourni votre code permanent dans la section [1] au-dessus, vous devez attacher un document sur lequel figure votre code permanent tel qu'un relevé de notes (CEGEP) ou une attestation d'aide financière de la province du Québec.

McGill Student Number/Numéro de matricule McGill

E-mail address/courriel

2

3 Legal Last Name/ Nom légal

4 Legal First Name/Prénom légal

5 Date of Birth / Date de naissance

Sex/Sexe (M/F)

Year/Année Month/Mois Day/Jour

6 Place of Birth/Lieu de naissance (City, Country- If Country is Canada, please also include Province/Ville,Pays- si le pays est le Canada veuillez aussi indiquer la province)

City/Ville Province Country/Pays

7 Father's Last and First Names/Le nom et prénom de votre père

Mother's (Birth) and First names/Le nom (naissance) et prénom de votre mère

8

I hereby certify that the information provided in this form is true, accurate and exact. I understand that this declaration has the same force and effect as if made under oath, in conformity with the *Canada Evidence Act*. Je déclare que tous les renseignements fournis dans ce formulaire sont véridiques, exacts et complets. Je reconnais que la présente déclaration a la même force et le même effet que si elle était faite sous serment, en conformité avec *la loi de la preuve du Canada*.

DATE:

SIGNATURE:

FOR OFFICE USE ONLY:

ARR/January 2005 V7

UNIVERSITY SIGNATURE:

DOCUMENT:



Consent for Release of Official Documents and Sharing of Information

Student information (please print)

Table with 2 columns and 7 rows for student information: McGill ID, Name, Former name, Date of Birth, Phone number, Fax, Current Address.

Consent

In accordance with the Quebec Act Respecting Access to Documents Held by Public Bodies and the Protection of Personal Information, McGill University is required to protect the privacy of personal information relating to current and former students. Requests for the release of personal information must be accompanied by a signed consent from the individual.

I, (please print) _____, authorize McGill University to release my personal information as defined below to the Home University Representative listed below.

Student's Signature: _____ Date: _____

To be completed by Parents/Legal Guardians of students under the age of 18:

Parent's/Guardian's name (please print): _____

Parent's/Guardian's signature: _____ Date: _____

Documents and information covered by this consent form:

- Official Transcript
Any communication, in any form, pertaining to my academic, financial or disciplinary records.

Home Institution Representative (please print)

Table with 2 columns and 5 rows for Home Institution Representative: Name, Phone number, Email, Fax number, Current address.

McGill University will not issue partial transcripts. Transcripts will not be issued if you have a "hold" on your record for non-payment of fees/fines. Normal processing time is 5 to 7 working days. Delays may occur for archived records (pre-1972 or pre-1986 for Continuing Education) and during peak periods. Students are responsible for ensuring that requests are submitted well in advance of deadline dates. McGill University is not responsible for transcripts lost or delayed in the mail.



GUARDIANSHIP FORM

NUin Canada

(PLEASE PRINT / REMPLIR LE FORMULAIRE EN MAJUSCULES)

STUDENT NAME
NOM DE L'ÉTUDIANT/E

FAMILY NAME / GIVEN NAMES / MR. MRS. MS

NOM / PRÉNOMS / M. MME MLE

Under the laws of Quebec and Canada, a person under the age of eighteen (18) years old is considered a minor. The responsibilities of the guardian are limited to assistance in case of emergency requiring medical care and assistance to the minor concerning the application of various university regulations, code of conduct as applicable in this case.

In case of emergency requiring medical care, the guardian shall attempt to reach the undersigned parents, in the order in which they appear below and using the contact information provided herein, as soon as possible in the circumstances;

Until one of the parents is reached, the guardian shall act in the best interest of the minor, taking into account his/her wishes as far as possible and in the respect of his/her rights.

Day-to-day supervision shall be the responsibility of Northeastern University's onsite staff in Canada.

I recognize that (first name/last name) _____ born on (dd/mm/yy) _____ / _____ / _____ is considered a minor until his/her eighteenth birthday on (dd/mm/yy) _____ / _____ / _____ .

I hereby confirm that I will act as guardian during his/her studies at McGill University, as this is part of my duties at McGill University, for which I am employed, upon his/her arrival in Canada, that shall not be before (dd/mm/yy) _____ / _____ / _____ , until he/she reaches eighteen years of age on (dd/mm/yy) _____ / _____ / _____ or the end date of his/her program or shortly after on (dd/mm/yy) _____ / _____ / _____ , whichever happens first.

I consent to being considered guardian of this person, with the limited duties described above;


GUARDIAN SIGNATURE

(PRINT NAME)

(TITLE)

(DATE OF SIGNATURE)

I request that this person be the guardian of my son/daughter and I consent to the exercise of the limited duties described above; In signing this form I do recognize the legitimacy of the actions taken by the guardian of my child while in Canada and I forego any rights or intent to sue his/her legal guardian in Canada under any circumstance.

PARENT SIGNATURE

(PRINT NAME)

(DATE OF SIGNATURE)

I request that this person be the guardian of my son/daughter and I consent to the exercise of the limited duties described above; In signing this form I do recognize the legitimacy of the actions taken by the guardian of my child while in Canada and I forego any rights or intent to sue his/her legal guardian in Canada under any circumstance.

PARENT SIGNATURE

(PRINT NAME)

(DATE OF SIGNATURE)

I consent and understand that this person will act as my guardian and I consent to the exercise of the duties as described above; In signing this form I do recognize the legitimacy of the actions taken by the guardian of my child while in Canada and I forego any rights or intent to sue his/her legal guardian in Canada under any circumstance.

STUDENT SIGNATURE

(PRINT NAME)

(DATE OF SIGNATURE)



(PLEASE PRINT / REMPLIR LE FORMULAIRE EN MAJUSCULES)

PRIMARY GUARDIAN EMERGENCY CONTACT WHILE IN CANADA

Address (complete address)

(STREET NUMBER, NAME, APT.)

(STREET NUMBER, NAME, APT.)

(CITY, PROVINCE)

(POSTAL CODE)

(PRIMARY TEL. #) [] HOME [] WORK [] OTHER

(SECONDARY TEL. #) [] HOME [] WORK [] OTHER

EMAIL ADDRESS

SECONDARY GUARDIAN EMERGENCY CONTACT WHILE IN CANADA

Address (complete address)

(STREET NUMBER, NAME, APT.)

(STREET NUMBER, NAME, APT.)

(CITY, PROVINCE)

(POSTAL CODE)

(PRIMARY TEL. #) [] HOME [] WORK [] OTHER

(SECONDARY TEL. #) [] HOME [] WORK [] OTHER

EMAIL ADDRESS

PARENT EMERGENCY CONTACT

Address (complete address)

(STREET NUMBER, NAME, APT.)

(STREET NUMBER, NAME, APT.)

(CITY, PROVINCE)

(POSTAL CODE)

(PRIMARY TEL. #) [] HOME [] WORK [] OTHER

(SECONDARY TEL. #) [] HOME [] WORK [] OTHER

EMAIL ADDRESS

Note for parent: Please list any health issues that your son/daughter has that may impact his/her academic performance and/or that you feel we should be made aware of: _____

PARENT EMERGENCY CONTACT

Address (complete address)

(STREET NUMBER, NAME, APT.)

(STREET NUMBER, NAME, APT.)

(CITY, PROVINCE)

(POSTAL CODE)

(PRIMARY TEL. #) [] HOME [] WORK [] OTHER

(SECONDARY TEL. #) HOME WORK OTHER

EMAIL ADDRESS

Note for parent: Please list all health issues that your son/daughter has that may impact his/her academic performance and/or that you feel we should be made aware of: _____



Short Term Residence Responsibility Form

Student name: _____

Student Home Address: _____

Student email address: _____

Cell (Mobile) phone number: _____

Home phone number: _____

Student date of birth: _____

Date of stay in residence: from (arrival): August 27th 2017 to (departure): December 22nd 2017

Study Program/Courses: N.U.in Canada 2017

Name of residence: EVO Centre-Ville

Address of residence: 420 Sherbrooke West, Montreal, QC, Canada

Cost of stay (all inclusive): 0\$ (paid by McGill through contract with Northeastern University)

What is included in the fee: Accommodation in double occupancy for the duration of the stay within arrival and departure dates above, facilities at the Residence, bi-monthly cleaning of room, bathroom and outside of appliances (small fridge, small freezer, microwave, hair dryer)

What is not included in the fee: Cleaning of bed linen, towels, personal clothing, toiletries, meals, and all other items not explicitly mentioned as being included in the fee.

I, (print name)_____ thereby request that a double occupancy room be rented for me during my stay at McGill University in the aforementioned residence hall above. I realize that I have no control over the assigned roommate to the same room if I selected a double occupancy room. I also accept full financial responsibility, including finance charges that will accrue on unpaid charges and all costs relating to the collection of unpaid balances, including attorney fees, collection costs and interest for any damage that I may cause directly or indirectly to the Residence, its furniture and other content and for injuries that I may directly or indirectly cause to other residents, guests or myself. At the time of departure, any missing item originally supplied with the room will also be my financial responsibility. I acknowledge that I am aware of the non-smoking policy of the residence;



I assume financial responsibility for any cleanup costs that may be required. I will abide by the Residence's Code of Conduct, and all the relevant McGill policies and regulations.

Student's signature: _____ **Date:** _____

If the student is not 18 years of age at the date of signature of this form, a parent or legal guardian must sign below, assuming de facto full responsibility in place and name of the student.

I, (print name) _____ thereby accept full responsibility in place and name of signee above for their use of the aforementioned residence.

Parent's or Legal Guardian's signature: _____ **Date:** _____



Volunteering – Rules of Engagement

- Community organizations do a lot of good in society, taking care of those who need our support and help. As these organizations are not sufficiently funded and since their needs are many, they rely heavily on volunteers to accomplish their missions. As a volunteer in one of these organizations, they will count on you to help them bring hope to those who need it.
- Your commitment to the cause and your weekly involvement in these projects matter. Skipping a single week of work may disorganize a whole project, resulting in unfortunate consequences for the needy.
- McGill University takes the commitment it makes to the community very seriously by associating the N.U.*in* Canada Program with these Montreal organizations. Through your weekly commitment, you will not only represent McGill, but also Northeastern University, and the commitment that our two institutions jointly share towards giving back to the community; you will act as our ambassadors.
- We realize that your schedule will get busier and busier as time passes, that you will have last minute assignments to hand-in, that you may need to put more effort into studying than what you had expected and that your social life may be very active. However, a commitment is and remains a commitment.
- Our commitment towards these causes is strong; we need you to show the same strength in yours. Therefore please read the rules of engagement below. By signing this document, you promise to demonstrate the commitment that these projects require and the commitment that McGill University and Northeastern University both expect from you.

I, (print name) _____, will commit to the project that I will be assigned to and will adhere to the following rules of engagement.

1. Showing up on time: In order to avoid delays on the work that needs to be done weekly by the team to which I will be assigned, I promise to arrive on time, signal my presence upon arrival, use my name tag (if required) and join my team promptly.



- 2. Work ethics:** In spite of problematic situations that may arise and the repetitive nature of the work, I promise to keep the spirit and moral of my team positive, focusing on the end-result of the project, demonstrating a strong commitment in difficult situations.
- 3. Absence and Lateness:** In order not to compromise the work that my team must achieve weekly, in rare cases when I am unable to participate in a weekly session or when I know that I will be arriving late, I will inform both the volunteer site and the NEU site Lead of my absence or lateness through email. So that my commitment remains strong, I will reschedule the missed session at some other time during the semester with the help of the NEU site Lead.
- 4. Food:** Should I need to bring food/snacks with me to the volunteer site, I am aware that certain restrictions may apply to prevent issues related to food allergies, religious consideration or of other nature. Therefore, I will enquire about the appropriateness of bringing food to the volunteer site before doing so.
- 5. Clothing:** As these community organizations serve a wide range of people from different backgrounds, I will make sure that I wear appropriate clothing (i.e. no short shorts or skirts, T-shirts with messages or photos that could be interpreted as offensive, etc.). I will also make sure to wear the proper shoes (no flip-flops or high heels) since my work may require that I move boxes, climb on stairs or ladders.
- 6. Communicating:** As I will be representing both Northeastern University and McGill University, I will always act and communicate with my teammates, the other volunteers, the representatives of the organization, the personnel at the volunteer site and the general public in the most respectful manner. I will refer any problematic situation to a volunteer site representative.
- 7. Safety, Security & Boundaries:** For security reasons, I will familiarize myself with emergency exits in the building and the fire drill procedure at the volunteer site.
- 8. Support of Teammates:** Recognizing that my teammates may need my help while at the volunteer site, I will offer my support to others who need it. If this support interferes with my tasks, I shall discuss the issue with the volunteer site representative.
- 9. Photography:** Treating people who are seeking help with dignity implies that I will not take pictures or videos at the volunteer sites without the explicit consent of the volunteer organization representation and the NEU site Lead.
- 10. Telephone, Cell Phone, Computer and Other Electronic Device(s) Usage:** As with any other commitment, I realize that my focus and energy while at the volunteer site will be devoted towards my work. Therefore, I will not engage in any texting, messaging, or phone call conversations while at the volunteer site, especially since some volunteer sites have regulations and restrictions concerning the use of electronic devices.
- 11. Social Media:** As many relationships that I will be building with others at the volunteer sites may be with underage children, because of the Quebec laws pertaining to interacting with such a young crowd, including taking pictures and videos, I will not befriend any underage person on Facebook or any other social media platforms.



12. Dating: As I must remain focused throughout my entire work schedule at the volunteer sites, I will not bring any significant other, family member or friend to the volunteer site during my volunteer work hours.

13. Smoking: Public buildings in the Province of Quebec are subject to a ban on smoking inside buildings and near entrances (in a radius of 30 feet from each entrance). Some volunteer sites may have additional restrictions and you will be informed on the specifics by the site coordinator. A smoke break is only permitted during your breaks. The Law forbids volunteers under 18 to smoke. Of course, I promise to abide by the Law.

14. Drugs/Alcohol Use: As a representative of my N.U.in cohort, Northeastern University and McGill University, I will not come to my volunteer site under the influence of drugs or alcohol nor will I use or sell drugs or alcohol while at my volunteer site. I understand that this is a serious offence that is illegal and in contradiction with my commitment to the project.

15. Confidentiality: I understand that I may have access to confidential information, both verbal and written, relating to clients and participants of my assigned volunteer site. I understand, and agree, that all such information is to be kept strictly confidential. I also agree not to discuss these matters beyond my volunteer position at my volunteer site.

16. Volunteer Site Policies and Regulations: I will respect and abide by the Policies and Procedures of the volunteer site. That is part of my commitment.

I have read the above rules of engagement for volunteers and I attest to the seriousness and implications of my commitment by signing this document.

Volunteer's Signature

Parent's Signature (for volunteers under 18)

Name (PRINTED CLEARLY)

Name (PRINTED CLEARLY)

Date

Date