

Pacifica Peer Mentorship Program Waiver and Release of Liability

Acknowledgment of Participation

I, **[Insert Participant's Name]**, acknowledge that my participation in the Pacifica Peer Mentorship Program ("Program") is entirely voluntary. I understand that this Program is designed to facilitate peer-to-peer support and networking and does not constitute academic advising, counseling, or any form of professional or legal guidance.

Assumption of Risk

I acknowledge that my participation in the Program carries inherent risks, including but not limited to misunderstandings, disagreements, or miscommunications. I understand that while the institution strives to create a positive and supportive environment, it does not guarantee any particular outcomes from participation in the Program.

Limitation of Institutional Liability

I understand and agree that the institution, its affiliates, employees, officers, and representatives (collectively, "the Institution") are not responsible for any advice, guidance, or information provided by mentors or mentees. The Institution does not assume responsibility for the actions, statements, or conduct of participants in the Program.

I further release, waive, and hold harmless the Institution from any and all claims, liabilities, damages, or losses, whether known or unknown, arising out of or related to my participation in the Program, including but not limited to personal injury, emotional distress, or financial loss.

Confidentiality and Mandatory Reporting

I understand that while mentors and mentees are encouraged to respect confidentiality, confidentiality is not absolute. Mentors are required to report any disclosures related to harm to self or others, harassment, discrimination, or other conduct violations in accordance with institutional policies, including Title IX and the Clery Act.

Program Termination

I understand that my participation in the Program is subject to compliance with its guidelines and policies. I acknowledge that the Institution reserves the right to terminate my participation at its discretion if I fail to meet expectations, engage in misconduct, or violate any applicable policies.

Acknowledgment of Understanding

By signing below, I affirm that I have read and understand this waiver and voluntarily agree to its terms. I acknowledge that I have been given the opportunity to ask questions before signing.

Participant Name: _____

Signature: _____

Date: _____