

UNIVERSITY OF MALTA
DEPARTMENT OF BIOLOGY

Form

to be filled by all students take one or more study-units organised by the Department of Biology

In seeking to register for study-units and project work in biology at the Department of Biology of the University of Malta (henceforth, 'the Department') during the period starting

from: _____ to _____.

I (full name) _____

residential address _____

do hereby warrant and acknowledge;

1. that I am in a good general state of health and that I do not suffer from any condition that renders me unfit to undertake all activities which I may be required to participate in, in order to complete the programme of study, including study-units, practical work, fieldwork and project work and all the associated tasks.¹
2. that I have read and will abide with the Department's manual entitled "*Safety Precautions and Code of Practice*", and that I will follow all health and safety and other instructions given to me by the staff of the department.
3. that I understand and appreciate fully the fact that there may well be risks, hazards and dangers involved to which I would be subjected, in the teaching and research programmes of the Department, in particular to work undertaken in the field as well as on University premises.

I will follow all teaching and practical classes as directed by the Department and in doing so I will abide with the applicable health and safety rules and regulations as may be prescribed from time to time by the Department of Biology and University of Malta and their employees.

I voluntarily will not hold the Department of Biology and the University and their employees, responsible or liable in any way for, and that no right of action shall arise from, any loss or damage (including, without limitation, death, personal injury or property damage) whatsoever and howsoever caused by or sustained as a result of the undertaking of any work in the laboratory or in the field as required in order to complete my programme of study including study-units, practical work, fieldwork and project work and all the associated tasks assigned by the Department of Biology, whether through any form of negligence on the part of the University and its employees or not.

I hereby fully indemnify the Department of Biology and the University of Malta and their employees against all claims, proceedings, costs, expenses, loss or damage whatsoever and howsoever arising in respect of death, injury, disability or loss or property damage or loss arising from my work at the Department as described above. I will be responsible for obtaining adequate medical insurance for self protection and will be obliged to show proof of such insurance if required.

Signature _____ Date _____

¹ Persons with special needs should consult the department