



The Florida State University
Diving Control Board

STATEMENT OF UNDERSTANDING: COVID-19 EXPOSURE CONTROL

I have read and understand the University policies and procedures as stated in the following documents:

- General Release and Waiver of Liability Form
- For Scientific Divers - The Florida State University Standards for Scientific Diving Manual

Additionally, I have read and understand the University policies and procedures specific to the COVID-19 Pandemic in the following documents:

- Requirements for Approval of Diving Operations during the COVID-19 Pandemic
- Exposure Control Guidelines for Diving Operations during the COVID-19 Pandemic

I have read and had each of the above explained to me. All questions I may have had have been answered to my satisfaction. I agree to abide by the policies and conditions contained in these documents. In addition, I further understand that failure to follow any of the policies established by the FSU Academic Diving Program, the FSU Diving Control Board, or any of their administrative personnel or staff may lead to my suspension from diving activities or revocation of permission to dive under FSU auspices.

I understand that loss of University equipment or damage to University equipment may result in my being invoiced for the cost of replacement or repair of said equipment.

I **UNDERSTAND AND AGREE** that diving during the COVID-19 Pandemic may have additional risks such as limited and/or no access to emergency medical services and limited and/or no coverage by various programs of insurance such as worker's compensation.

Name (print clearly)

Signature

Witness Name

Witness Signature

Date

Parent or Legal Guardian Signature
(If diver is under the age of 18)