



The Summer Institute of Politics | WELCOME PACKET

Welcome and congratulations on your selection to The Summer Institute of Politics at Salve Regina University. We look forward to welcoming you to our beautiful Newport, RI campus on Sunday, July 13th. Get ready for a week of re-imagining our country's approach to political discourse and civic engagement by grappling empathetically with the great challenges our nation faces.

Please review the following packet closely with your parent or guardian and upload the required forms by 5.15.25 when you make your final payment. If you have tech issues uploading the information, please email the packet directly to Teresa Haas (Teresa.haas@salve.edu), Office and Events Manager at The Pell Center. Failure to submit completed information in time may result in your removal from the program. If you have any questions call Teresa Haas at 401-341-2371.

Packet checklist

Ensure you have completed the following tasks:

- ☐ Parent/guardian has completed the Participation Permissions form
- ☐ Parent/guardian and student have read and signed the Behavior Agreement form
- ☐ Parent/guardian has completed the Health History form
- ☐ Student has reviewed Institute pack list
- ☐ Parent/guardian or student has submitted this form and a copy of health insurance (all in PDF format) to Teresa Haas (teresa.haas@salve.edu) by 5.15.25
- ☐ Final payment submitted by 5.15.25
- ☐ Parent or guardian has completed the Travel Form (due 6.30.25)



The Summer Institute of Politics | PARTICIPATION PERMISSIONS

Parent/Guardian: please complete the following form.

SECTION 1: Student and emergency contact information

Student's full name: _____ DOB: _____

Gender: _____ Pronouns: _____

Preferred Name (Nickname): _____

Parent/Guardian/Emergency contact name: _____

Relationship to student: _____ Phone: _____

Parent/Guardian email: _____

Home address: _____

Name of additional emergency contact: _____

Relationship to student: _____ Phone: _____

SECTION 2: Permissions

In order that The Summer Institute of Politics staff may provide each participant maximum opportunity for personal growth, I understand that in signing this agreement I certify that my child is healthy and free of problems that could be detrimental to their safety or that of other students. I have read and I understand the packing information, the program description, and other information provided. In the event that my child's behavior is felt to be unsafe or unmanageable, if an illness or injury should arise in which a doctor's diagnosis is required, or if my child is unable to continue the program for any reason, I authorize the program management to dismiss my child early without refund, in which case I will assume responsibility for transporting my child from the Salve Regina University campus or, if away from Institute, another location convenient to the group, at a time specified by the program management. If I am not available, I authorize the emergency contact listed above to pick up my child.

Initial (parent/guardian): _____

I grant permission for my student to participate in all planned Institute activities, including those off campus, for which they may travel by bus with the group. I have read and understand the program description and I understand participation in Institute activities can expose my student to dangers from known and unanticipated risks. Acknowledging that such risks exist, I hereby release and discharge Salve Regina University and The Summer Institute of Politics, its officers, agents, and employees from any and all claims or liability for personal injury or property damage the student may suffer while participating in the Institute; including, but not limited to, any claim arising out of any condition of the premises at which Institute activities are held or the conduct of any person in connection with the preparation for, supervision of, or conduct of any activity, whether planned or unplanned. I specifically agree to release and hereby release Salve Regina University and The

Summer Institute of Politics and the officers, agents, and employees of the Institute for any negligence of the Institute, or its officers, agents or employees.

I agree to indemnify, hold harmless and defend Salve Regina University, and all of the its officers, agents, and employees, from and against liability for injuries to and deaths of persons or damage to property causes by the student's use of, occupancy of, or operations upon the premises, provided, however, that this covenant shall not extend to liabilities incurred from any negligent acts or omissions of the part of the university and its officers, agents, or employees.

Initial (parent/guardian): _____

I grant permission to Salve Regina University and The Summer Institute of Politics, its agents, and its employees the irrevocable and unrestricted right to produce photographs and video taken of my child at The Summer Institute of Politics for any lawful purpose including publication, promotion, illustration, advertising, trade, or historical archive in any manner or in any medium by The Summer Institute of Politics. I hereby release The Summer Institute of Politics and Salve Regina University and its legal representatives from liability for any violation or claims relating to said images or video.

Furthermore, I grant permission to use the statements of my child during an interview or evaluation with or without their name for the purpose of advertising and publicity without restriction to time limit or geographic area. I waive my right, my child's rights, and my family's rights to any and all compensation stemming from the use of these materials.

Initial (parent/guardian): _____

If the health or safety of other students or staff is at risk or suspicion of theft indicates the need, I grant permission for staff to inventory student's belongings in the presence of the student.

Initial (parent/guardian): _____

Parent/Guardian Authorization

Signature

Print name

Date



The Summer Institute of Politics | BEHAVOIR AGREEMENT FORM

Parent/Guardian and student: please complete the following form.

A major goal of the Summer Institute of Politics is to create a caring and supportive environment where all participants feel safe, welcomed, and accepted. Abiding by the Institute rules and guidelines ensures a memorable experience for all.

Since the Institute passes by so quickly, we set clear expectations up front. On the first day, we will review rules, which include:

- Respect staff, peer mentors, and other students,
- Abide by curfew times,
- Stay with the group at all times, unless otherwise explicitly allowed by Institute staff,
- Clean up after yourself in the residence halls, bathrooms, dining halls, and meeting rooms,
- Speak and act in a way that is physically and emotionally safe for yourself and others,
- Cellphones are to be silenced and put away during Institute sessions and activities unless explicitly permitted,
- Absolutely no: pocketknives, real or toy weapons, alcohol, tobacco, or drugs.

If a participant breaks a rule, a staff member or peer mentor will speak with the student about how and why the behavior was unacceptable. The Institute staff will use a four-strike system for inappropriate behavior:

- Strike 1: student receives a warning.
- Strike 2: student sits out of session and meets with Institute director.
- Strike 3: the student's parent/guardian is contacted by the Institute director.
- Strike 4: the student is excused from Institute; parent/guardian picks them up.

The severity of the offense may demand an immediate second, third, or fourth strike remediation. This progressive discipline system, combined with positive reinforcement, is designed to create clear expectations while giving the student as much agency as possible. The goal is to rectify inappropriate behavior well before a student is sent home.

Student's Signature

I know my behavior affects the people around me. I have read and understood the Institute rules and the strike system. I pledge to follow rules and treat others with respect and dignity. I understand if I fail to do this, I may be sent home early.

Signature

Print name

Date

Parent/Guardian Authorization

I have read the behavior agreement and understand that inappropriate behavior could result in my child being sent home early without refund. I have discussed the agreement with my child, impressing upon them the importance of following Institute expectations.

Signature

Print name

Date



The Summer Institute of Politics | HEALTH HISTORY FORM

Parent/Guardian: please complete the following form and submit it with a **copy of your insurance card**.

Immediately contact Teresa Haas (teresa.haas@salve.edu) if your child:

- Requires injections, is immunocompromised, has mobility limitations (e.g., cast, crutches, wheelchair), no spleen, food allergies, dietary restrictions, or any other special requirements. Some needs may require a doctor's note.
- Has an emergency inhaler or needs to carry an EpiPens/Benadryl due to an allergy. The Institute requires a doctor's written action plan. The student must carry these emergency medications at all times.
- Has had or been exposed to a contagious disease during the two weeks prior to Institute.
- Gets a serious cut, bruise, sprain, or skin rash during the two weeks prior to Institute.

SECTION 1: Medical information and background

Student's full name: _____

Parent/Guardian Health Insurance Co. _____ Policy # _____

Indicate if your child has any of the following medical conditions.

	Yes	No	If yes, please explain (approx. dates, method of treatment, restrictions)
Bleeding disorder			
Epilepsy			
Diabetes			
Asthma			
Kidney trouble			
Heart trouble			
Allergy injections			
History of fainting			
History of bed wetting			
History of sleep walking			
Compromised immune sys.			
Spleen removed			
Emotional or behavioral issues			
Learning disability			
Tetanus booster			
Immunizations up-to-date			
Travelled outside U.S. in 3 months prior to Institute			
Other			

Does your child have any allergic or other reactions to any of the following? If yes, provide a doctor's action plan.

	Yes	No	If yes, please explain (method of treatment)
Stings			Type:
Shellfish			
Nuts			
Eggs			
Soy			
Celiac disease			
Milk protein			
Other allergies/dietary restrictions			List:

Student accessibility needs/requests: _____

Any other information we should know about the student's medical background:

SECTION 2: Medications

Note: all medications must be in the original container, properly labeled, and placed in a Ziploc bag with written instructions. Medication is to be managed and administered by the student unless other specific arrangements have been made or in case of an emergency.

If your child is bringing prescription medication, including an EpiPen, please complete the following:

Medication: _____ Dosage/time: _____ Medical reason: _____
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SECTION 3: Permissions to treat

Permission to administer over-the-counter medications/First Aid

I (parent/guardian) hereby give permission for Institute staff to administer the following over-the-counter medications:

Medication	Yes	No	Medication	Yes	No
Tylenol			Calamine Lotion or CortAid		
Ibuprophen			Neosporin		
Advil			Sudafed		
Pepto Bismol			Robitussin DM		
Immodium AD			Pamprin		
Tums			Benadryl		

Dosages will be administered according to directions on the bottle unless a physician directs otherwise.

Notes: _____

Initial (parent/guardian): _____

Permission to treat and secure treatment:

I hereby give permission to the medical personnel selected by the Institute director to provide routine health care; to order X-rays, routine tests, treatment; to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation for my child.

In case of an emergency, I give permission to have my child admitted to the hospital or another medical facility for medical treatment. I assume all medical expenses for my child. I understand that information on this form will be share with those who will be directly caring for the child. In the event of an illness, injury, or any other issue which prevents the child from continuing the program, I authorize Institute management to dismiss my child, in which case I assume responsibility for arranging transportation. I authorize those listed as emergency contacts on the Participation Permissions form to sign out my child upon presentation of photo identification.

Initial (parent/guardian): _____

I acknowledge that my child is currently covered by health insurance, and it is valid through the duration of the Institute. I will inform Teresa Haas if that is to change. Additionally, if insurance coverage should lapse during the program, I am financially responsible for incurred health expenses.

Initial (parent/guardian): _____

Parent/Guardian Authorization:

This health history is correct and complete to the best of my knowledge. The person herein described has permission to engage in all activities except as noted.

Signature

Print name

Date

The Summer Institute of Politics | SUGGESTED PACKING LIST

Suggested packing list

- ☐ Blanket (recommended)
 - You may want to also bring your own bedding and pillow, though this will be provided. Mattresses are twin extra-long.
- ☐ Towels
 - Bath, hand, beach
- ☐ Toiletries
- ☐ Sunscreen
- ☐ Insect repellent
- ☐ Medication
- ☐ Shower caddy
- ☐ Shower shoes
- ☐ Comfortable shoes for walking
- ☐ Rain jacket
- ☐ Umbrella
- ☐ Sweatshirt or other warm clothing
 - It can get chilly in Newport by the water, especially at night
- ☐ Bathing suit
- ☐ One to two business casual outfits
 - On Thursday and Friday, students will present a final project to esteemed visitors and we recommend dressing in business casual attire. For all other Institute events, the dress code is casual. If you have concerns, please contact Teresa Haas (teresa.haas@salve.edu).
- ☐ Phone charger
- ☐ Night light or flashlight
- ☐ Snacks
- ☐ Reusable water bottle
- ☐ Backpack for carrying water bottle, books, and notebooks, etc.
- ☐ Notebook and pens/pencils
- ☐ Laptop computer
 - If you have a laptop, please bring it. If you do not or are unable to bring one, Salve will provide one for your use during Institute. Please contact Teresa Haas to arrange a loaner.

Other tips:

- Bringing a fan is unnecessary (residence hall rooms have A/C)
- Label personal items
- Do not bring anything unnecessary of great value