



Date: _____

Name of observer: _____

Address: _____

Dear _____:

Name of Observer

On behalf of the University of Pennsylvania School of Dental Medicine, we welcome you as an observer to our school and clinics! Please take a moment to review this letter, which contains references to some of Penn Dental's policies and procedures. After you are done, please sign in the space provided below and return a copy of this letter to your contact person at Penn Dental.

Your observer or volunteer experience will take place in:

(Name of clinic, lab, etc.)

During the period:

(Start and end dates)

Your contact person is:

(Name of sponsor)

Observers are required to adhere to all Penn Dental policies and procedures, including but not limited to safety policies. If you intend to observe work in the clinic or laboratory, you will be given some basic clinical or laboratory safety training. Completing this training is an essential condition of your coming to Penn Dental.

The University and Penn Dental maintain a number of policies established during the COVID-19 pandemic intended to reduce the incidence of disease in our community. If you are not fully vaccinated, prior to arriving on campus, each day you must complete a daily symptom screening tool, and when indoors, you must observe distancing requirements and wear an approved face covering.

Office of the Dean
University of Pennsylvania
School of Dental Medicine
240 S. 40th Street, Philadelphia, PA 19104
Tel: 215-898-1038 Fax: 215-573-4075 Email: dean@dental.penn.edu

Observers and volunteers assume all risks associated with their experience at Penn Dental. By entering and remaining at Penn Dental, you knowingly and voluntarily assume the risk of any illness, injury, or death arising out of or relating in any way to exposure to hazards at the University and/or Penn Dental, including but not limited to COVID-19; this includes negligence on the part of the University and/or Penn Dental and/or their faculty, employees, students, and agents. Further, you agree to release the University and/or its faculty, employees, students, and agents from any claims or liability arising out of your experience at Penn Dental.

If you have any questions or concerns regarding the above, please do not hesitate to contact Ms. Kimberly Wolcott, or Dr. Najeed Saleh.

Once again, we welcome you to Penn Dental, and wish you an enjoyable and rewarding experience!

Sincerely,



Mark S. Wolff, DDS, PhD
Morton Amsterdam Dean
University of Pennsylvania
School of Dental Medicine

ACKNOWLEDGED AND AGREED:

(Signature of observer)

Dated: _____

c: Najeed Saleh, DDS
Ms. Kimberly Wolcott
Sean Burke, Esq.