EXHIBIT A STATEMENT OF WORK

This Statement of Work is entered into pursuant to the Staffing Master Services Agreement between the parties _____. Except as otherwise expressly agreed in this Statement of work, all terms and conditions set forth in the Staffing Master Services Agreement shall govern. **ASSUMPTION OF THE RISK.** Staffing Agency acknowledges and understands the following: 1. Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist: 2. Staffing Agency knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19, even if arising from the negligence or fault of the Released Parties; and 3. Staffing Agency hereby knowingly assume the risk of injury, harm and loss associated with the Activity, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties. Hiring Department and Individual Requesting Staffing Services: Professional Services/Deliverables: Term - Start Date and Completion Date: Compensation: IN WITNESS WHEREOF, the parties have executed this Statement of Work by their duly authorized officers or representatives as indicated by their signatures below, effective as of the date written above. Staffing Agency Trinity University Signature Signature Name Name Date Date

This Exhibit is hereby incorporated into the Staffing Master Services Agreement between Trinity and Staffing Agency.