STUDENT SELECTED SERVICE-LEARNING AGREEMENT

The purpose of this agreement is for you, in conjunction with your professor and community partner supervisor to outline the goals, activities, and learning objectives for your service experience. Be as explicit as possible in filling out this agreement. Please return a copy of this agreement to your professor, partner site supervisor, and the Director of Service-Learning, Room 1014, Wedgewood Academic Center, (615) 460-5431.

PLEASE BE SURE TO COMPLETE ALL PARTS (1-4) OF THIS AGREEMENT

PART 1: CONTACT INFORMATION

Student Name: _____   Email: _____

Phone: _____

Professor's Name: _____   Phone: _____

Course Title: _____   Course # & Section: _____

Community Partner: _____

Address: _____
           Street #   City,   State   Zip

Supervisor: _____   Title: _____

Phone: _____   Email: _____

PART 2: NUMBER OF SERVICE HOURS

Minimum Number of Hours to be completed: _____   Start Date: _____   End Date: _____

Signing this form indicates you agree to complete the number of hours stated above that meets the needs of the community organization AND is relevant to this course.

_____
Student's Signature   Date

PART 3: SERVICE-LEARNING PROJECT DESCRIPTION

Please outline the following. Please use a separate sheet of paper if needed and attach it to this form.

A. Learning Objectives: What do you intend to learn through this experience?

B. Learning Activities: Describe how your service-learning activities will enable you to meet your learning objectives. Include projects, research, conversations, etc. relating them to what you intend to learn.

C. Supervision & Evaluation: Describe in detail the supervision to be provided. What kind of training and ongoing assistance will you receive? Who will you speak to if a problem arises? How will you know that you have achieved your learning objectives? How will you evaluate your progress towards meeting these objectives?

PART 4: SERVICE-LEARNING AGREEMENT

This Agreement is made by and among _____ ("Student"), _____ ("Community Partner"), and Belmont University ("University")

1. Purpose.

The purpose of this Agreement is to place Student in a work assignment with the Community Partner as part of a Service-Learning Program offered by the University for Academic Credit or required by course of study. In consideration of the mutual provisions herein, the parties hereby agree to the following:

2. Community Partner Responsibilities.

2.1   The Community Partner shall provide the Student with a contact who will monitor and supervise the student throughout the service- learning project.

2.2   The Community Partner shall maintain in force during the term of this Agreement general liability insurance, insuring itself and its agents and employees for their acts, failures to act or negligence with minimum coverage limits of $500,000. If requested, Community Partner will supply a certificate of insurance. Community Partner agrees to keep Belmont University advised of any changes in this policy.

2.3   The Community Partner will maintain a reasonably safe environment by observing all applicable safety regulations under the Occupational Safety and Health Act.

2.4   In the event that the Student is injured or becomes ill during the course of the service-learning program, the Community Partner shall provide medical assistance and first aid to the Student as appropriate.

2.5   The Community Partner will be responsible for damages caused by the negligence of its directors, officers, agents, employees and volunteers occurring in the performance of the activities described by this Agreement.

2.6   The Community Partner will assume responsibility for compliance with all applicable federal, state and local laws regarding wages and income tax withholding. Community Partner will satisfy any liabilities created by the failure to maintain the nonemployee status of the Student.

2.7   See Attached Service-Learning Project Description for Community Partner criteria and obligations specific to this service-learning program

3. University Responsibilities.

3.1   A University faculty member shall mentor the Student throughout the service-learning program.

3.2   The University will be responsible for damages caused by the negligence of its directors, officers, agents, employees and volunteers occurring in the performance of the activities described by this Agreement.

3.3   See Attached Service Learning Project Description for University criteria and obligations specific to this service-learning program.

4. Student Responsibilities.

4.1   Student shall use his or her best efforts in performing all tasks assigned by the Community Partner.

4.2   Student agrees to abide by the Partner's rules and regulations.

4.3   Student will conform his or her conduct to Belmont's Statement of Values found in the Bruin Guide.

4.4 Student shall diligently pursue the academic course work for which Student is registered during the service-learning program.

4.5 **Insert description of peculiar risks associated with internship, if any** _____

_____

_____

_____

4.6 On behalf of him/herself, family, heirs and legal representatives, Student agrees to release Belmont and Community Partner, their agents, employees, officers, and trustees, from any liability for damage or loss to his/her person or property which may occur during participation in the service-learning program, to personally assume all risks associated with his/her participation in the program, and to indemnify Belmont and Community Partner against and hold them harmless from, any and all expenses and claims for loss, liability, or damages that arise out of or relate to, the acts or omissions of the Student during his/her participation in the program. However, Student shall not be liable to indemnify Community Partner if the conduct giving rise to the claim is the direct and consequent result of and arises out of the supervision and instruction of Community Partner, its employees or agents.

4.7 Student shall provide Belmont and Community Partner with a written request for reasonable auxiliary aids or services that may be necessary to accommodate a disability the Student may have no later than 30 days prior to the start of the service-learning program.

4.8 Student has fully informed him/herself of the contents of this Agreement by reading it before signing it.

4.9 The University recommends that Student maintain sufficient health, accident, disability and hospitalization insurance for the duration of the internship. Student shall be responsible for any expenses incurred due to injury, illness or damage suffered during the course of the experiential learning program.

4.10 See Attached Service Learning Project Description for Student criteria and obligations specific to this service-learning program.

5. Mutual Obligations and Responsibilities.

5.1 The term of this Agreement shall extend from _____, 201___ to _____, 201___. However, this Agreement may be terminated by any party upon _____ (days, weeks, etc.) written notice.

5.2 The relationship of the parties to each other is solely that of independent contractors. No party shall be considered an employee, agent, partner or fiduciary of the other except for such purposes as may be specifically described in this Agreement. Nor shall anything contained in this Agreement be construed to create any partnership or joint venture between the parties. However, if the Community Partner pays the student a salary, then an employer/employee relationship is established between those two parties.

5.3 The parties to this Agreement agree to not illegally discriminate on the basis of race, color, national origin, religion, sex, age, disability or military service in the programs and activities described by this Agreement.

5.4 The parties to this Agreement will comply with the Family Educational Rights and Privacy Act by keeping confidential all records concerning students' service experience.**IN WITNESS WHEREOF**, the parties hereto have executed this Agreement as of the day and year first written above.

STUDENT (If any student is under age 18, please contact CSESL for additional paperwork.)

Signature: _____ Date: _____

Print Name: _____

COMMUNITY PARTNER REPRESENTATIVE

Signature: _____ Date: _____

Print Name & Title: _____

PROFESSOR

Signature: _____ Date: _____

Print Name: _____

DIRECTOR OF SERVICE-LEARNING

Signature: _____ Date: _____

Print Name: _____