

# Student Service-Learning Referral Form

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Course Number: \_\_\_\_\_ Course Title: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_

Do you have a car? Yes No

Are you willing to carpool with your peers to the community organization? Yes No

Can we share your email with other students referred to work at the same organization? Yes No

**To help us refer you to the community organization you are most interested in, please provide us with the following information:**

First Choice for Community Organization:

*Why are you interested in working at this community organization?*

Second Choice for Community Organization:

*Why are you interested in working at this community organization?*

Third Choice for Community Organization:

*Why are you interested in working at this community organization?*

Which day(s) of the week and time are you available to work at the community organization?

	morning	afternoon	evening
Sunday	from _____ to _____	from _____ to _____	from _____ to _____
Monday	from _____ to _____	from _____ to _____	from _____ to _____
Tuesday	from _____ to _____	from _____ to _____	from _____ to _____
Wednesday	from _____ to _____	from _____ to _____	from _____ to _____
Thursday	from _____ to _____	from _____ to _____	from _____ to _____
Friday	from _____ to _____	from _____ to _____	from _____ to _____
Saturday	from _____ to _____	from _____ to _____	from _____ to _____

# Student Service-Learning Participant Agreement

In order for community service-learning partnerships to be effective and beneficial for all parties involved, it is essential that several basic responsibilities are outlined and understood.

**As a Student Service-Learning Participant, I agree to the following:**

1. I will make contact with my referral organization within 48 hours of receiving this referral from the CCLC staff.
2. I will attend all meetings, orientation/training, and reflection sessions as deemed necessary by my community organization site supervisor and my instructor.
3. I will be punctual, responsible, appropriate, and professional. I will notify my site supervisor in case of illness and make arrangements for any absences as far in advance as possible. I understand any absence will be noticed since community work is very relationship oriented and people depend on me to keep my commitments.
4. I will keep an accurate record of the hours that I contribute at my community organization for the course. I will turn this information in to my instructor via the Community Involvement and Service-Learning Hourly Log and have an organization staff member sign the log to verify my work at the end of the semester.
5. I will respect and follow confidentiality, ethical practice, and safety guidelines as outlined in the "Student Guide to the Academic Service-Learning Experience."
6. I will adhere to the rules, regulations, and other requirements of the community organization in accordance with city, state and federally mandated policies and procedures.
7. I will keep in mind that I am representing not only myself, but also other current and future University students while I am working in the community
8. I will treat the individuals I come into contact with at my community organization with respect by challenging myself to keep an open mind, by examining and questioning my values and beliefs, and especially while interacting with people different from myself in terms of race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status, or sexual orientation.
9. I will notify my community organization supervisor, instructor, and the CCLC staff of any problems as soon as they arise.
10. I understand that there are risks involved in doing community work and that the University does not assume any responsibility for injuries or loss to my personal property while I am participating in a community organization. I understand I should obtain health and/or personal property insurance if I do not have it.
11. I will complete an evaluation of the community-based learning experience, and provide a copy of this evaluation to the CCLC at the end of the term if applicable.

## Student Participant:

I have read and understand the above agreement and I agree to complete \_\_\_\_\_ hours per week, or \_\_\_\_\_ total hours, between the dates of \_\_\_\_\_ to \_\_\_\_\_ in the fulfillment of the community service-learning objectives described above and to meet my academic requirements of this service-learning experience.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_