SERVICE LEARNING AGREEMENT FORM

Bring this form and your course syllabus and/or service learning assignment directions with you the first time you visit your community organization.
RETURN COMPLETED FORM TO YOUR PROFESSOR PRIOR TO BEGINNING SERVICE

Student's Name: _____Student ID #:_____

Phone: _____ E-mail: _____

Course: _____ Instructor:_____

Minimum # of hours to be completed: _____

Goals:

Service Learning Student:

☐ I have read and will adhere to the Guidelines and Tips for Success document
☐ I have filled out the Service Learning Online Registration Form

By signing this agreement form, you are agreeing to participate in a service activity and waive district liability as set forth in this declaration for said participation.
All persons traveling to and from the volunteer site shall be deemed to have waived all claims against the District or the State of California for injury, accident, illness or death occurring during the trip. I agree that any accidents or infractions (moving violations) incurred while driving my own vehicle are the sole responsibility of myself. I will not hold Palomar College, its employees and agents responsible for any such damage, injury or liabilities. Further, injuries and or illnesses occurring during or as the result of my participation in the service learning class should be covered in accordance with the premiums of the student insurance program as the secondary health insurance carrier.

X_____ _____
Student's Signature **Date**

Service Learning Site:

Organization: _____ Supervisor Name/Title: _____

Phone: _____ E-mail:_____

Duties to be performed: _____

_____

_____

X_____ _____
Site Supervisor's Signature **Date**
I agree to accept the above-named student and provide adequate training and supervision at this service learning site.