

**INTERNSHIPS & SERVICE-LEARNING
STUDENT CONSENT FORM****SECTION I: PERSONAL DATA**

Date: _____ Semester: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Student ID #: _____

SECTION II: COURSE INFORMATION

Course Title: _____ Faculty Name: _____

Course 5 Digit ID _____ Number of hours required _____

SECTION III: ORGANIZATION INFORMATION/LEARNING ACTIVITY SITE

Company/Organization: _____

Supervisor Name: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

Position Title: _____

SECTION IV: EMERGENCY CONTACT INFORMATION

Name: _____ Relation: _____

Telephone Number-day: (____) _____ Telephone Number Cell: (____) _____

Name: _____ Relation: _____

Telephone Number-day: (____) _____ Telephone Number Cell: (____) _____

SECTION V: PARTICIPATION CONSENT FORM

PLEASE READ CAREFULLY

1. I agree to participate in a responsible manner at the Learning Activity Site and to abide by all rules governing my learning activity. I will not drive a vehicle as part of my learning activity as opposed to getting to and from the activity site. I understand that if I drive a vehicle, the University may terminate its consent to this learning activity.
2. I agree to devote _____ hours per week at the Learning Activity Site for a total of _____ hours, effective from _____ to _____. I agree to complete any forms, evaluations or other paperwork required by either the course or the site supervisor as they relate to the learning activity.
3. I understand the connection between my class activities and the experiential learning objectives to be fulfilled at the Learning Activity Site.
4. I am voluntarily participating in this learning activity. I understand that I may take back my consent and stop taking part at any time. I agree to contact the University at (714) 278-3746 if I believe my rights have been or may be violated.
5. I understand and acknowledge that there are risks associated with this learning activity, some of which may arise from (a) my assigned tasks and responsibilities, (b) the location of the learning activity, (c) the physical characteristics of the Learning Activity Site, (d) the amount and type of criminal activity or hazardous materials at or near the location of the learning activity, (e) any travel associated with the learning activity, (f) the time of day when I will be present at the Learning Activity Site, (g) the criminal, mental and social backgrounds of the individuals I will be working with or serving, and (h) the amount of supervision I will receive. I further understand and acknowledge that my safety and well-being are primarily dependent upon my acting responsibly to protect myself and others from personal injury, bodily injury or property damage.
6. I have discussed the risks associated with this learning activity with my site supervisor at the Learning Activity Site. Being aware of the risks inherent to this learning activity, I nonetheless voluntarily choose to participate in this learning activity.
7. I agree that, while participating in this learning activity, I will not (a) report to the Learning Activity Site under the influence of drugs or alcohol.; (b) give or loan money or other personal belongings to a client; (c) make promises or commitments to a client I cannot keep; (d) tolerate any verbal exchange of a harassing nature, or engage in behavior that might be perceived as harassment with a client or Learning Activity Site representative; (e) tolerate any verbal exchange or engage in behavior that might be perceived as discriminating against an individual on the basis of their age, race, gender, sexual orientation, mental capacity, or ethnicity; (f) engage in any type of business with clients during the term of my placement; (g) disclose without permission the Learning Activity Site's proprietary information, records or information concerning its clients; or (h) enter into personal relationships with a client or Learning Activity Site representative during the term of my placement.
8. I am in good health and able to participate in this learning activity.
9. In consideration of being permitted to participate in this learning activity, I agree to indemnify the State of California, the California State University Trustees, California State University, Fullerton, and their respective officers, agents, volunteers, and employees, from liability and responsibility for any future claims against any of them by reason of any personal or bodily injury or property damage arising from my acts or omissions in the performance of this learning activity.

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10. I am 18 years old or older and legally competent to sign this Consent Form. I have carefully read and understand its terms and their significance. No oral representations or inducements have been made to me to sign this Form.

Student Signature: _____

Date: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

(Parent/Guardian signature required if student is under the age of 18.)