

service activities, acknowledge that workers compensation benefits are not extended to me in my capacity as server/volunteer, and hold Blinn College, its employees, officers, and Board of Trustees harmless.

I understand and acknowledge that the College is not affiliated with, nor does it have a right of control over the operations of, the Agency. The College's sole role is to facilitate placement of willing student enrollees with agencies who are willing to provide service learning opportunities. The College is not responsible for any errors, omissions, or negligence on the part of the Agency, its employees, directors, volunteers or Affiliates. I am further advised that the Agency may not maintain sufficient liability coverage to compensate an individual student for any harm experienced during the course of service at the Agency.

If you have questions about the existence or sufficiency of liability insurance coverage at your proposed service placement, please contact the specific agency directly. Any Student who objects to assignment to a service agency which the Student deems to possess insufficient insurance coverage may request assignment to a different agency, subject to available placement openings.

Legal guardian: I specifically grant this waiver of claims for myself and/or on behalf of my ward identified above and will hold harmless such institutions and individuals from any claims.

Important: In order to protect the persons working or residing at the community partner site, particularly if it is a school, nursing home or medical facility, I will refrain from attending the site if I am ill.

Check one: student parent legal guardian

Name (please print) Signature Date

College Representative

Service Learning Director or Service Learning Campus Coordinator, Signature Date

Note: The Service Learning Director or Service Learning Campus Coordinator must have this form on file prior to the initiation of the service learning experience.

(Optional Demographic Information in order to track program diversity.)

I identify as (mark all that apply:) Asian Black African Heritage African-American
 Latino/Hispanic Caucasian/Anglo International other: _____

Age: under 18 _____ Major: _____
18 – 25 _____ (May list undecided)
25 – 35 _____
35 & older _____

Year: 1st year _____ Gender: Male _____
2nd year _____ Female _____
3rd year _____
4th year _____