

# University of Oregon

## ENVIRONMENTAL STUDIES/SCIENCE PROGRAM

### Participatory Learning Experience Agreement Between STUDENT AND COMMUNITY PARTNER

#### STUDENT INFORMATION

Last Name: \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ Student ID# \_\_\_\_\_

Address: \_\_\_\_\_ Apt \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

#### COMMUNITY PARTNER INFORMATION

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

Address: \_\_\_\_\_ Apt \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_

Beginning Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Hours per week \_\_\_\_\_ Total hours \_\_\_\_\_

#### POSITION DESCRIPTION

#### LEARNING Objectives (attached)

RESPONSIBILITIES OF SUPERVISOR (e.g. written evaluations, letter of recommendation, number of meetings during the term)

UNIVERSITY'S LIABILITY "The student is not an employee of the University. Any compensation arrangements made between the Community Partner and the student are outside of this agreement. Except for any special arrangements specifically documented in writing prior to the beginning of the PLE and made part of this agreement, the student is responsible for his/her own transportation, parking, and any expenses associated with the PLE.

The Oregon Tort Claims Act (ORS-30.260 – 300) permits the University to accept responsibility only for the acts of its officers, employees, and agents. Since a student participating in a PLE does not qualify as any of those persons, the University is prohibited from accepting any liability for the act, omissions, and conduct of students in a PLE and is prohibited from providing coverage with State Accident Insurance or other workers' compensation, liability insurance, or unemployment insurance. "Community Partner" agrees it is the 'Community Partner's' responsibility to determine what provisions or actions are necessary to fulfill any liability and workers' compensation obligations created by its participation in a PLE."

#### SIGNED:

Student \_\_\_\_\_ Date \_\_\_\_\_

Community Partner Supervisor \_\_\_\_\_ Date \_\_\_\_\_