

**COMMUNITY SERVICE 1 AGREEMENT FORM**

**Non Profit Agency Section**

This agency agrees to engage the student under the same conditions and rules that govern other employees and/or volunteers without regard to race, creed, color or sex. We agree to hold the California State University, Fresno, its employees and agents, free and harmless from any claims and causes of action resulting from our voluntary participation in this program. We also agree to provide general work site orientation, supervision and make every reasonable effort to provide a safe working environment. We understand that we are accepting the student as a volunteer, that we are not responsible for providing wages, but agree to assist California State University, Fresno by certifying that the student completed the minimum hours of community service required by the Com S 1 course (15, 30, or 60 hours for the semester). We also understand that the University provides no insurance coverage for this program (including Worker's Compensation Insurance).

\_\_\_\_\_  
**Agency Name, Address & Zip (Please Print)**

\_\_\_\_\_  
**Name and Title of Agency Representative/Supervisor (Please Print)**

\_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**Signature of Agency Representative/Supervisor**

\_\_\_\_\_  
**Date**

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**Student Section**

I agree to abide by the requirements of the Com S 1 course and the guidelines set forth by the above agency. I agree to hold the California State University, Fresno, its employees and agents, free and harmless from any claims and causes of action resulting from my voluntary participation in this program. I understand that I am responsible for turning in all forms to the University at the required times and for meeting all deadlines. I understand that I must complete the required hours (15, 30, or 60) as a volunteer with a non-profit organization, complete any reading and/or writing assignments, and attend the weekly class meeting throughout the semester in order to receive academic credit. I also understand that the University provides no insurance coverage for this program (including Worker's Compensation Insurance).

\_\_\_\_\_  
**Name, Address and Zip of Student (Please Print)**

\_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**# of Units Enrolled in CS 1**

\_\_\_\_\_  
**Social Security/I.D. #**

\_\_\_\_\_  
**Com S 1 Section (class day & time)**

\_\_\_\_\_  
**Signature of Student**

\_\_\_\_\_  
**Email Address**

\_\_\_\_\_  
**Date**

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**University Section**

California State University, Fresno will provide guidance and supervision for any accredited educational training associated with this program. We will assist the agency and student with all related matters and, when appropriate, will assist the agency in appraising student performance. The University will provide credit to qualified students but will not provide the student or agency with any kind of insurance coverage (including Worker's Compensation Insurance) for this program.

\_\_\_\_\_  
Chris Fiorentino, Instructor/Director

**Student must return completed form to their Com S 1 instructor.**

**Students for Community Service  
Peters Building Annex, Room PBAT-10  
5245 N. Backer, PB 120, Fresno, CA 93740-8032  
(559) 278-7079 • Fax: (559) 278-7634  
<http://www.csufresno.edu/scs>**

**SUBMITTAL DEADLINE:** BEFORE BEGINNING SERVICE HOURS and no later than the end of the fourth week of the semester. **Please Note:** If this form is not submitted by the required date, students could risk the right to use the hours volunteered with the agency listed for the purpose of satisfying Community Service 1 course requirements.