

Community Service Agency and Student Contract Information

Name of Agency: _____

Agency Address: _____

Supervisor's Name: _____ Phone _____

•The agency and the student volunteer have agreed that this is **what the student will do** for the agency and its clients:

•These are the **days and times** the student will work:

•We have discussed the following issues (please check):

- The purpose of the job the student will be performing.
- Expectations as to appropriate dress and behavior.
- Liability and safety issues and whom to call if student is ill and cannot work.

•We both understand that we should call the administration at Half Moon Bay High School with any questions, problems, concerns, comments, etc. (650-712-7200)

Student Signature Date

Community Service Agency Staff Date

Parent Date

Parent Release and Hold Harmless Section

I hereby give permission for my child _____ to participate in the Community Service Program at Half Moon Bay High School, ***including any travel associated with that program.***

In case of an injury of a minor nature, first aid should be administered by a responsible adult at the volunteer site. In case of medical emergency, the student should be placed in the care of a physician at the nearest medical facility. YES NO

Alternate instructions _____

Emergency contact person and telephone number _____

I hereby release all claims and agree to hold harmless the Cabrillo Unified School District, its officers, employees and volunteers for and from liability for personal injury, including physical and emotional injuries, and/or property loss/damage which my child may incur while he/she participates in the Community Service Program.

THIS DOCUMENT IS INTENDED TO PROTECT THE CABRILLO UNIFIED SCHOOL DISTRICT, ITS OFFICERS, EMPLOYEES AND VOLUNTEERS FROM CLAIMS OF NEGLIGENCE (THE FAILURE TO USE REASONABLE CARE). THIS DOCUMENT IS NOT INTENDED TO PROTECT THE SCHOOL DISTRICT FROM LIABILITY FOR THE WILLFUL OR INTENTIONAL INJURY TO PERSON OR PROPERTY OF ANOTHER.

I have carefully read this agreement and fully understand its contents. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT AND THAT IT IS A LEGALLY BINDING CONTRACT BETWEEN THE ENTITIES IDENTIFIED ABOVE AND ME.

Signature of Parent/Guardian _____ Date _____

Print Name _____ Phone _____

Half Moon Bay High School Community Service Contract and Timesheet

Graduation year

Student Name _____

Social Studies/History Teacher _____ Period _____

Date	Description of Service	Start Time	Finish time	Hours Worked
Total Hours Worked				

Sponsor Contact _____

Supervisor Signature for Completed Hours _____

By signing below I certify that I participated in the activities described above and am entitled to claim Community Service credit:

Student Signature _____

Date: _____

