

SITE INFORMATION**Project Site (Name and location)**

Name of Supervisor _____**Phone number** _____ **e-mail** _____**Estimated # of hours?** _____**Days and hours student will work (be as specific as possible)****Service Learning Project Description****The agency agrees to provide the student with the following (please check)****Orientation** _____**Training** _____**On-site supervision** _____**Assessment** _____**Other (please specify)**

Student: I agree to perform the service detailed in the project description, to attend all offered orientations and trainings and to adhere to the schedule outlined above.

Student's Signature _____ **Date:** _____

Supervisor: I agree to provide the training, orientation and supervision necessary for the student to successfully complete this project.

Supervisor's Signature _____ **Date** _____