

Daemen College
Department of Service Learning
Service Learning Contract
Students, Faculty, and Site/Agency Supervisor

Student Name _____	Student ID# _____
Address (Residence Hall/Local) _____	
Telephone Number _____	E-Mail Address _____
Agency/ Community/Organization _____	
Agency Address _____	
Agency Phone Number _____	Supervisor _____
Hours per Week _____	Total Hours Required _____

AGREEMENT

STUDENT	
As a student enrolled in _____, for ____ credits, I agree to provide _____ hours of service from _____ to _____ in fulfillment of the objectives described above to meet the academic requirements of the Service Learning course.	
Signature: _____	Date: _____
COMMUNITY/ AGENCY SUPERVISOR	
As supervisor to _____, I hereby agree to guide his/her work done under my direction (as outlined above) and to complete a final evaluation of the above student's placement.	
Signature: _____	Date: _____
COURSE INSTRUCTOR	
I have examined _____'s learning plan (described above) and find it satisfactory. Upon my evaluation of the student's fulfillment of the course requirements, I will reward _____ credits for the class. I have also attached a copy of the course syllabus.	
Signature: _____	Date: _____