



smc public policy institute

Experiential Learning Program

STUDENT-AGENCY PLACEMENT AGREEMENT

Section I Student completes	Student Name: _____		SMC I.D. # _____																	
	Email Address: _____		Phone: _____																	
	Instructor: _____		Semester: _____																	
	Agency Name: _____																			
	Course: _____		Section: _____																	
Section II Student completes with Site Supervisor	Name of Community Agency: _____																			
	Address: _____																			
	Site Supervisor's Name & Title: _____																			
	Email Address: _____		Phone: _____																	
	Experiential Learning Project description (the type of work to be performed and the student's responsibilities): _____ _____ _____ _____ _____																			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 14.28%;">Monday</td> <td style="width: 14.28%;">Tuesday</td> <td style="width: 14.28%;">Wednesday</td> <td style="width: 14.28%;">Thursday</td> <td style="width: 14.28%;">Friday</td> <td style="width: 14.28%;">Saturday</td> <td style="width: 14.28%;">Sunday</td> </tr> <tr> <td style="height: 40px;"></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>							Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday														
Work schedule																				
Site-provided services	<p>The agency agrees to provide the students with the following (please check):</p> <p> <input type="checkbox"/> On-site supervision required <input type="checkbox"/> Orientation <input type="checkbox"/> Training <input type="checkbox"/> Work Space <input type="checkbox"/> Screening <input type="checkbox"/> Assistant </p> <p> <input type="checkbox"/> Other (please specify): _____ </p> <p>I DO AGREE TO AND WILL UPHOLD THE TERMS OF THIS AGREEMENT.</p> <p> Site Supervisor's signature: _____ Date: _____ </p> <p> Student's signature: _____ Date: _____ </p>																			
Section III Note to the Supervisor	<ul style="list-style-type: none"> The student will give you a form to log student hours of service and perform the end of project evaluation. Please have the student take this form to his/her instructor by _____. If applicable, please feel free to provide a recommendation letter for the student's résumé. Please retain a copy of this form for your records. 																			
It is the student's responsibility to return this form to his/her instructor at Santa Monica College.																				

white copy – Instructor

copy – Student

pink copy - Agency