Course Based Service Learning Student Packet:

Waivers, Timesheet, and Assessment
Included in this packet:

1. Conduct, Waiver of Liability, Prohibited Activities & Information Form
2. Service Learning Timesheet for Documentation of Projects

*Please print and complete these forms and turn them into your instructor.*
CONDUCT, WAIVER OF LIABILITY, PROHIBITED ACTIVITIES & INFORMATION FORM

This form indicates your understanding that: a) while participating in a WCU sponsored activity, you must comply with conduct requirements of the Student Code of Conduct; and b) WCU is not responsible for any mishaps or injuries that occur as a result of your participation in this activity.

Students may not engage in WCU sponsored activity unless they have completed and submitted this form. Anyone who participates in this activity without signing below will be considered to be operating independently of Western Carolina University and the Center for Community Engagement and Service Learning.

Conduct Statements – Please Initial Each One

1. I will follow and comply with the WCU Student Code of Conduct.
2. I will follow all rules and/or guidelines of the agency for which I am serving.
3. I will use appropriate language at all times.
4. I will not consume alcohol, regardless of my age, and will not perform services under the influence of illegal substances. I understand that this is a substance-free activity.
5. I will not have contact with anyone in the service setting in a harmful and/or violent manner.
6. I will inform the agency representative of problems that occur while I am performing services.
7. I will adhere to appropriate social standards in virtual environments. (e.g., consider your apparel, backgrounds, and noises).

I understand that violations of the above Conduct Statements may result in student disciplinary action, immediate dismissal from the activity with any cost incurred for travel being my responsibility, and/or ineligibility to participate in future activities.

Liability Waiver

1. I understand the nature of the activity contemplated, and voluntarily assume all the risks and responsibilities surrounding my participation in this activity.
2. I specifically and completely RELEASE, INDEMNIFY, AND HOLD HARMLESS the State of North Carolina, the University of North Carolina, and Western Carolina University and all their directors, officers, employees, and agents from all liability, causes of action, claims, and demands of every kind which may arise out of or in connection with my travel to and from, and participation in this activity.
3. It is my express intent that this General Release shall bind the members of my family, heirs, assigns, and personal representatives if I am deceased. I hereby further agree that this Conduct Agreement and General Release shall be construed in accordance with the laws of the State of North Carolina.
4. I understand, consent to, and hereby waive any right in or to the use of my name; likeness; photograph, including moving photographs; and/or audio recording (Content) associated with the activity to be used by WCU in any way that it deems appropriate including, but not limited to, educational/instructional purposes, development purposes, income generating purpose, and newsworthy purposes. I grant to WCU a worldwide, perpetual, irrevocable, royalty-free license to publish, reproduce, modify, and/or transfer its interest in the Content. I hereby waive any right(s) I may have to inspect or approve any use of the Content and I release WCU from all liability which could result from its use.
5. By participating in any voluntary field trip offered by WCU you acknowledge the contagious nature of COVID-19, the fact that it can be difficult to identify in another, and the inherent risks of exposure at the University to those who may be infected with COVID-19. You voluntarily assume the risk that you may be exposed to or infected by COVID-19 by participating in voluntary field trips and that such exposure or infection may result in personal injury, illness, permanent disability, and/or even death. You voluntarily assume full responsibility for any and all risks of illness or injury associated with my exposure to COVID-19, as well as from use of any protective equipment, including face masks, that the University may voluntarily provide to me. By voluntarily participating you completely absolve the University, its trustees, officers, employees, agents, and contractors and any and all legal or financial responsibility, including, but not limited to, any personal injury, disability, illness, damage or death from exposure to COVID-19, whether such exposure occurs before, during or after my participation in voluntary field trips. Also, you agree, on behalf of yourself, your personal representatives and heirs, not to make any type of legal or equitable claim on University, or any of its trustees, officers, employees, agents or contractors with respect to any exposure you may have to COVID-19, whether or not it arises through the negligence, omission, default or action of anyone affiliated with the University, including fellow students. You further agree that if any such claim is made, you will indemnify and defend University with respect to any such claim.

Prohibited Activities

There are certain activities that Western Carolina University students, faculty and staff may not perform in the course of their service learning/community service projects. The prohibited activities include: Aiding or engaging in partisan political activities – Organizing or engaging in protests, petitions, boycotts, or strikes – Engaging in religious instruction, conducting worship services, or engaging in any form of proselytizing – Activities that pose a significant safety risk to participants – Assignments that displace employees.

Signature: __________________________ Date: ________________
Print Name: __________________________ 920#: __________________________
Classification: (circle one): Freshman Sophomore Junior Senior Graduate Student
Other Information
Dietary restrictions, allergies, or medications: __________________________
Cell Phone #: __________________________ Birthday: ________________
Emergency Contact Name: __________________________ Relationship: __________________________ Contact #: __________________________
## Service Learning Timesheet

**Student Name:** __________________________  **Email & Phone Number:** __________________________

**Agency & Contact Name:** __________________________  **Agency Contact Phone Number(s) & Email Address:** __________________________

### Prohibited Activities

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- Activities that pose a significant safety risk to participants
- Assignments that displace employees

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**I certify that the service hours and activities indicated above are accurate and appropriate.**

Student’s Signature: __________________________  Date: __________________________

Signature(s) of Agency Contact(s) & Date  Signature(s) of Agency Contact(s) & Date