

**University of Utah College of Nursing
Service Learning Community Partner
Statement of Understanding**

VOLUNTEER SERVICE-LEARNING AGREEMENT AND COMMITMENT

The undersigned University of Utah College of Nursing student with the support of the undersigned faculty agrees to the following standards, guidelines, and procedures:

1. Maintain professional behavior and demeanor at all times.
2. Maintain confidentiality of community partner at all times.
3. Maintain a minimum of two (2) hours per week serving with the partner agency.
4. Maintain regular (usually weekly) contact with the community partner to receive assignments and provide/receive feedback.
5. Arrange alternatives with community partner in case of schedule conflicts that may occur.
6. Immediately notify community partner and their faculty of any concern, problem, or incident that transpires during the service-learning activity.
7. Agency partners and students will immediately contact the instructor with any concerns, problem, or incident that transpires during the partnership.
8. Provide course objectives and the course description each semester to the community partner.

Failure to adhere to any of these guidelines and procedures will result in termination from the project and a failing grade for the service-learning credits of the course.

The community partner agrees to:

1. Provide opportunities and an orientation for university students to engage in the formulation and completion of service projects that increase the effectiveness of the organization in carrying out their mission.
2. Agency partners agree to provide feedback to students and the instructor regarding student performance and outcome/impact of the service activity during the semester and at the end of the semester that can/will be used to determine a grade.
3. Agency partners identify a "contact" person to serve as a liaison to the instructor if it is someone other than the director.
4. The agency supervisor will provide service opportunities for university students that meet instructional objectives of the course.
5. The instructor and students will provide service that meets the needs of the agency.
6. Agency partners and students will immediately contact the instructor with any concerns, problems, or incident that transpires during the partnership.

Student Signature _____ Phone # _____

Student Printed Name _____

Date _____

E-mail _____

Agency Name _____

Community Partner Representative

Signature _____ Phone # _____

Printed Name and Title _____

Date _____

E-mail _____

College of Nursing Faculty Representative _____

Signature _____

Printed Name and Title _____

Date _____ Phone # _____

Confidentiality Statement

I shall respect the privacy concerns of all agency clients and staff. I will work with, and I shall hold in confidence all information learned in the course of my service, whether that information is obtained through written records or daily interaction. I will not disclose an individual's confidences to anyone, except: 1) as mandated by law or 2) to prevent a clear and immediate danger to a person or persons.

I shall demonstrate a professional attitude which upholds confidentiality toward clients and staff and any sensitive situations at my assigned site.

I, upon leaving this position, shall maintain child/parent/staff/client confidentiality and hold confidential any information about sensitive situations at the site.

Student Signature _____ Date _____

Student Name Printed _____