Practicum 096: Community Service & Learning Registration Form for SPRING 2015

THE SHRIVER CENTER

shrivercenter.umbc.edu

Thank you for your interest in The Shriver Center's Service-Learning program! Upon completing this form, you will be enrolled in the 096 Practicum through the Service-Learning Program for the SPRING 2015 semester. By completing these forms, you are registering for the 096 Practicum, a zerocredit course that is graded Pass/Fail. Please see the 096 Practicum syllabus for a list of requirements which must be met in order for a Pass grade to be earned. Your signature below authorizes the Shriver Center to register you in the 096 Practicum. Please write legibly and complete all pages of this registration packet.

NAME			GENDER				
UMBC EMAIL	ADDRESS		UMBC ID #				
MAJOR			CE				
Class Standing	g (Circle): FR	ESHMAN	SOPHOMORE	JUNIOR	SENIOR	GRADUATE STUDENT	
SERVICE SITE	PLACEMENT						
DAY(S) & TIM	E(S) ATTENDING SITI	Ē					
HOW DID YOU	U HEAR ABOUT SERV	ICE-LEARNIN	G?				
	. If your GPA is below 2 shool requirements with	-			=	nsure that you are able to	
REGISTRATIO	N INFORMATION						
• Are you	already registered for ar If you answered YES, p form for <u>each</u> service-l	ease let a Servio	e-Learning Coordinator		ust complete a so	Y/N eparate Practicum registration	
● Have yo	ou registered for a service	-learning placer	nent through the Shrive	r Center in the pas	st?	Y/N	
If yes, have you ever received an "Inc			mplete" grade for the 0	Y/N			
 If yes, have you ever received a "Fail" gr 				Y/N			
Please	Please initial to indicate that you received the syllabus for the 096 Community & Service-Learning Practicum.						
will pro evaluat		icipation in a Ur a Pass/Fail grad	niversity sanctioned exp	eriential learning _l	oosition. This en	vice-Learning Practicum that ables The Shriver Center to placement and the	
		-	Signature			Date	
For office use on	•			Falan	d into 0000 //	IMPCder	
Date:					•	JMBCworks:	
Enroll in:	Practicum 96-01 Service-Learning		cticum 96-02 vice-Learning Leadership		racticum 96-03 hriving Living Led	arning Center	
Blackboard section	on: 1				gg	3	
New placement:			to student / sent to pla			d:	
CROSSCHECK:	Date:		Section:		Initial:		

Service-Learning Student Information Spring 2015

Participation in The Shriver Center's Service-Learning Program is a privilege and our UMBC students provide a valuable service to under-served and vulnerable populations. The Service-Learning Program relies on student disclosure to ensure the safety and appropriate service placement of all registrations in Practicum 096: Community Service & Learning; some community partners may also elect to conduct a background check on volunteer placements, and these are completed at the discretion of the service site. All students seeking a Service-Learning placement are asked to provide responses to the following questions. A Service-Learning Coordinator will request a meeting with students who respond "Yes" to any of the following questions to individually discuss the circumstances and evaluate the appropriateness of a service placement on a case-by-case basis.

	Have you ever been convicted of, or pled guilty to, ar	iy criminal or military onei	-	ng minor tra Yes	ffic violations? □ No
•	Have you ever incurred disciplinary action, been acade previous educational institution?	demically dismissed from, a	nd/or decla □ Yes	ared ineligibl	<u> </u>
•	Are you currently under disciplinary suspension (whe at UMBC or another educational institution?	ther in effect, imposed for	a future tin ☐ Yes	ne period, or	
	answer "yes" to any of these questions, please attach of the control of the contr	= =	lude in tha	t letter your	name and date(s) of
By subiunders that I a detrime with St service	read the following carefully before signing: mitting this Practicum 096 registration form, I certify th tand and agree to inform the Service-Learning Program m serving with the Program this semester, or if I engag ental to the of the Shriver Center or my service placeme udent Judiciary Programs, if it is deemed necessary, in a placement. If the information contained on this form, blete and/or incorrect, I understand that this could impart for it.	n if any of my responses to e in, or am investigated fo ent. I consent to The Shriv order to determine fitness or information I provide in	the above or, conduct the center character for the Servarperson or	questions chan nat would like necking my de vice-Learning in a stateme	ange during the time cely be deemed lisciplinary record g Practicum or nt, is found to be
 Studen	t Name (Please Print)	Date			
	t Name (Please Print) t Signature	Date			
Studen Select s manne Coordi		Date ined to administer all Practive would prefer to submit you	our form dir	ectly to a Se	rvice-Learning
Studen Select s manne Coordii service	t Signature student leaders in the Service-Learning Program are tra r and may have access to your registration form. If you nator, you are responsible for setting up a meeting (cor	Date Date Inned to administer all Prace I would prefer to submit you Intact information is listed I	our form dir pelow) to di	ectly to a Se scuss your re	rvice-Learning

Please note that your Practicum 096 registration cannot be fully processed until this form and attached waiver have been submitted. The last day for students to submit paperwork to Service-Learning staff for Practicum 096: Community Service & Learning is Friday, February 28, 2015.

THE SHRIVER CENTER at UMBC SERVICE-LEARNING PROGRAM

9636 Gudelsky Drive Rockville, MD 20850 Phone: 301.738.6081

Fax: 301.738.6340 shrivercenter.umbc.edu

Service-Learning Information Wavier Student Wavier

I have disclosed information to The Shriver Center's Service-Learning Program regarding my criminal record or military offense(s), or student disciplinary action on my record, for the purpose of obtaining a service placement for the 096 Practicum. I understand and consent to The Shriver Center to disclose this information to the following community partner, with whom I am seeking a service placement. I acknowledge that this disclosure is consensual and guided by the Family Educational Rights and Privacy Act.

Name of Service-Learning Community Partner		
This community partner will evaluate my request for their discretion.	placement in their program, and the decision to be	placed is at
Student Name (Please Print)	Date	
Student Signature	 Date	_