



# Palomar College Service Learning Student Packet

## **3 EASY STEPS**

**1. Learn from your instructor the Service Learning course requirements.** You are required to complete ALL forms to receive Service Learning credit for your course.

**2. Read, sign, & submit the following forms to your professor.**

Beginning of Semester:

- Student Waiver of Liability (page 3)
- Service Learning Agreement Form (page 4)

End of Semester:

- Time Sheet (page 5)
- Evaluation of Student Performance (page 6)

**3. Complete the following forms online:**

Beginning of Semester:

- Online Registration Form for Service Learning

End of Semester:

- Online Completion Form for Service Learning

For questions, contact the Service Learning Office at  
servicelearning@palomar.edu or (760) 744-1150 Ext. 3734.  
We are located on the Palomar College Main Campus, Building P-8B.  
<https://www2.palomar.edu/pages/servicelearning/>



## Service Learning Guidelines and Tips for Success

Please read through and abide by the following guidelines created to assist you in having the best and most productive service learning experience possible:

- During Service Learning you are representing yourself, your professor, your department, and Palomar College as a whole. Please represent us well!
- When contacting an organization to set up your Service Learning experience:  
*Be polite, professional, and patient.*
- If sending an email, or leaving a phone message, be professional and give specific information. For example, you can say:

*Hello, My name is \_\_\_\_\_ and I am a student at Palomar College. This semester I am taking a course (state which class) with a Service Learning component. I am looking for an opportunity to volunteer at least \_\_\_\_\_ hours with (state your goal or desire). I saw your organization on the Service Learning Community Partners List and I reviewed your website. I would like to volunteer with your organization. I would like to visit with you about this opportunity at your earliest convenience. Please e-mail me at \_\_\_\_\_ or call me at \_\_\_\_\_. Thank you for your time.*

*Sincerely,  
Your Name  
(E-mail address)  
(Phone number)*

- When participating in Service Learning at your site:*
  1. **Be Reliable** – Both the administrators and the persons whom you serve rely on your punctuality and commitment in completing your hours over the entire course of the semester. Be sure to allow time for traffic, arrive on time, and call in advance if a sickness or emergency occurs.
  2. **Be Responsible** – Complete the tasks assigned to you. Know what is expected of you. Ask for help if you are unsure of what to do.
  3. **Be Professional**- Dress appropriately (modest attire, closed toed shoes, no inappropriate writing on clothing). Do not eat, drink, or smoke while volunteering. Keep cell phones on silent and put away. Use polite and respectful language. Use formal names unless instructed otherwise.
  4. **Be Respectful** – Keep information about clients confidential. Avoid gossip with employees or clients.
  5. **Be Flexible** – Be patient if your tasks change slightly, and be understanding if a situation is different than you expected. However, if the work you are being asked to do makes you feel uncomfortable, speak politely to your supervisor. If the problem continues, contact your professor and the Service Learning department.
  6. **Be Positive** – Smile as much as possible. Keep a positive attitude even if it feels like things are not going well. Kindness goes a long way and can make difficult situations better.
  7. **Be Safe** -
    - NEVER report to your service site under the influence of drugs or alcohol.
    - NEVER give or loan client money or other personal belongings.
    - NEVER make promises or commitments to a client you cannot keep.
    - NEVER give rides to clients or children
    - NEVER give out personal information to clients
    - NEVER develop a personal relationship with a client



**LIABILITY**

**Hold Harmless Agreement / Waiver of Liability  
Palomar Community College District**

**Service Learning**

1140 West Mission Road, San Marcos, C.A. 92069-1487

Phone: (760)744-1150 Extension 3734

Email (questions only): [servicelearning@palomar.edu](mailto:servicelearning@palomar.edu)

Class or Event: \_\_\_\_\_  
Instructor: \_\_\_\_\_  
Event Date(s): \_\_\_\_\_

ADMINISTRATION ONLY Received by: \_\_\_\_\_  
Instructor: \_\_\_\_\_ or  
Office: \_\_\_\_\_

**PLEASE PRINT OR TYPE CLEARLY, SIGN, DATE, AND RETURN TO YOUR INSTRUCTOR:**

Participant's Name: \_\_\_\_\_  Male  Female  Other  
Last First MI

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Classification:  Student  Faculty/Staff  Guest

Emergency Contact Name: \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

I, the above named participant, am eighteen years of age or older and have voluntarily applied for or enrolled in Service Learning event, activity or class, at Palomar College.

I acknowledge that the nature of the event, activity or class will expose me to hazards or risk that may result in my illness, injury, including permanent and live-compromising or life-terminating injuries, such as for example only a spinal cord injury to any other vital organ or limb, or death and I understand and appreciate the nature of such hazards and risks.

That participant shall indemnify, defend and hold harmless the Palomar Community College District, its officers, agents and employees from all claims, suits, or actions of any nature arising out of my participation in the **ACTIVITY** other than acts of gross negligence by Palomar College, its officers, employees, and /or agents.

In consideration of my participation in the Service Learning event, activity, class, I hereby accept all risk to my health and of my injury or death that may result from such participation.

In signing this waiver, I acknowledge that I have read it, understand its significance and am signing voluntarily of my own free will. I certify that I'm at least 18 years of age, and that if I am under 18 of age my parent/legal guardian has signed this form on my behalf.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Patent/Legal Guardian (if under 18):

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_





## SERVICE LEARNING TIME SHEET

**Record your hours neatly and ask for the supervisor's signature each time you serve.  
 At the completion of your service, return this sheet to your professor.  
 You will also need to fill out the Online Completion Form (found on the Info for Students page of the Service Learning Website)**

Student Name: \_\_\_\_\_ Student ID \_\_\_\_\_

Instructor's Name: \_\_\_\_\_ Course: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Community Organization: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Date	Time In	Time Out	Total Hours	Supervisor Signature

**Total Service Hours Completed:** \_\_\_\_\_

I have filled out the Online Completion Form on the Service Learning Website

**I hereby verify that the above is accurate.** \_\_\_\_\_ (student's signature) \_\_\_\_\_ (date)

*Do you have enough hours for a certificate, graduation cord or stole? Contact us!*

Palomar College Service Learning Program  
 E: [servicelearning@palomar.edu](mailto:servicelearning@palomar.edu) P: (760) 744-1150 x3734  
<http://www2.palomar.edu/servicelearning/>



## SERVICE LEARNING EVALUATION OF STUDENT PERFORMANCE

When you have completed your service learning activity, give this form to your supervisor to complete.  
Return the completed form to your professor.

Student Name: \_\_\_\_\_ Semester \_\_\_\_\_

Instructor's Name: \_\_\_\_\_ Course \_\_\_\_\_

Community Site: \_\_\_\_\_

TO THE SUPERVISOR: Please check the appropriate responses:

	Excellent	Good	Fair	Poor
<b>Student Reliability</b> (punctual, completed service hours)				
<b>Sensitivity to Others</b> (sensitive to other's needs, respects differences)				
<b>Willingness to Learn</b> (open to learning new things, receiving feedback)				
<b>Communication Skills</b> (listening, speaking, writing)				
<b>Teamwork</b> (worked well with others, positive attitude)				
<b>Self-Initiation</b> (Seeks to learn more about the organization, motivated to make a difference)				
<b>Overall Evaluation of Performance</b>				

Additional Comments: (use back of paper if necessary)

Supervisor Name: (Please Print): \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date \_\_\_\_\_