

**CHILD AND FAMILY SCIENCE INTERNSHIP (CFS 193I) AGREEMENT FORM**

**Non-profit Agency/Fresno State Faculty Researcher**

This agency agrees to engage the student under the same conditions and rules that govern other employees and/or volunteers without regard to race, creed, color, or sex. We agree to hold the California State University, Fresno, its employees and agents, free and harmless from any claims and causes of action resulting from our voluntary participation in this program. We also agree to provide a general work site orientation and regular supervision, and to make every reasonable effort to provide a safe working environment. We understand that we are accepting the student as a volunteer, that we are not responsible for providing wages, but agree to assist California State University, Fresno by certifying that the student completed the minimum hours of community service required by the CFS 193I course (120 hours) and by providing feedback on the student's performance on two formal evaluations, and informally throughout the internship. We also understand that the University provides no Worker's Compensation insurance for interns. While payment is allowed, we understand internships cannot take place at students' current place of employment.

\_\_\_\_\_  
Agency Name (type or print)

\_\_\_\_\_  
Name & Title of Agency Representative/Supervisor

\_\_\_\_\_  
Representative/Supervisor Email Address

\_\_\_\_\_  
Representative/Supervisor Phone Number

\_\_\_\_\_  
Signature of Agency Representative/Supervisor

\_\_\_\_\_  
Date

**Student**

I agree to abide by the requirements of the CFS 193I course and the guidelines set forth by the above agency. I agree to hold the California State University, Fresno, its employees, and agents, free and harmless from any claims and causes of actions resulting from my voluntary participation in this program. I understand that I am responsible for turning in all forms to the University at the required times and for meeting all deadlines. I understand that I must complete the required and agreed-upon 120 hours as a volunteer with a nonprofit organization and other coursework in order to receive academic credit. I understand that the University provides no Worker's compensation Insurance for interns. Though payment is allowed, I understand that I cannot complete an internship at my current place of employment.

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Student Fresno State Email Address

\_\_\_\_\_  
Anticipated Graduation Date (Month, Semester, Year)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**DEADLINE: Forms are due before the end of finals week. Use your Fresno State email account to send completed form to [rbillen@csufresno.edu](mailto:rbillen@csufresno.edu) with the Subject line "CFS 193I Site Agreement Form."** Processing of form and validation of student records showing student to be in their last or second-to-last semester during Spring semester is required to receive permission number for CFS 193I. This will take 5-7 business days. Enrollment limits apply; you are advised to submit your form as early as possible.