

Partners Agreement
2005-06 Academic Year

Organization Name:

Address:

Name of Contact: _____ Title: _____

Phone: _____ Fax: _____

E-mail: _____ Web Address: _____

Mission Statement:

Has this organization provided civic engagement placements for Baylor students before?

Yes No

How many Fellows can this organization accommodate? _____

Does this organization provide volunteer insurance for Baylor students?

Yes No

What types of work will students perform? Please describe briefly and attach job descriptions.

Please describe the supervision the student will receive.

Organizational Requirements:

What is the minimum age requirement? _____

Is there a minimum time commitment? If yes, please explain the expectations.

Day/Hours when students are needed: _____

Is previous experience in a related area required? Are you seeking special skills?

If yes, please describe: _____

Is orientation/training required? Yes No

If yes, please describe and provide a schedule of training classes.

Can the organization accommodate student groups? Yes No How many? _____

Please check one (1) category that best describes your organization's primary focus.

Arts & Culture Children/Youth Computer/Technology

Conflict Resolution Disabilities Education/Literacy

Environment/Animals Homelessness/Hunger Health

HIV/AIDS Legal/Victim Human Services

Mental Health Recreation Immigrants/Refugee Assistance

Women Senior Citizens Nonprofit/Business
Management

Other

I would like for our opportunities to be posted on Baylor's volunteer list as well as the Academy for Leader Development & Civic Engagement Partners list.

Additional comments: _____
