



## Leadership Application

Semester \_\_\_\_\_

*No later than the 4<sup>th</sup> week of class, send this completed application to the Civic Engagement Coordinator in L117 at the Fall River Campus for approval. Service Records for approved projects are due by the 11<sup>th</sup> week of class.*

**I. PROJECT INFORMATION**

**Course Information** (if project is course-related; otherwise, skip this section):

Course ID (ex. SOC 101)	Section (ex. A01)	CRN (ex. 14338)
S-L Professor		E-Mail

**Student Information:**

Student Name (Last, First, MI)		Address (Street, City, State, Zip)	
Student ID	E-Mail	Cell Phone	Home Phone

**Community Partner Information:**

Organization		Address (Street, City, State, Zip)	
Supervisor's Name	Supervisor's Title	Phone	E-Mail

**Proposed Leadership Project:**

<p><b>Project Description:</b> (Brief description of the Community Service project to be performed by the group of BCC students or peers you will recruit, help supervise, mentor and lead)</p>	
Projected Start Date	Projected End Date

**Mutual Understanding:**

The undersigned student agrees to maintain contact with his/her BCC or Community Partner Supervisor and complete the project. If the leadership role is connected to an academic course, the undersigned student also agrees to complete a reflection assignment documenting the project, his/her personal growth in community leadership skills and commitment to future community service. The professor of the course for which the service was performed will complete a Credit Verification form to verify completion of the reflection assignment for a course. **The student leading a project during the Spring semester must complete the Community Service Record by April 15<sup>th</sup> in order to receive a red cord at the Civic Engagement Recognition Breakfast and be publicly recognized at graduation that year.**

**AGREED BY:**

<i>Signature</i>	<i>Date</i>	BCC/COMMUNITY PARTNER SUPERVISOR
<i>Signature</i>	<i>Date</i>	STUDENT LEADER
<i>Signature</i>	<i>Date</i>	STUDENT'S PROFESSOR (if course-related)
<i>Signature</i>	<i>Date</i>	CIVIC ENGAGEMENT COORDINATOR



**II. ACKNOWLEDGEMENT OF RISK AND CONSENT/WAIVER OF LIABILITY**

*To be read and completed by the student or, if student is under 18 years of age, by a parent or legal guardian:*

I acknowledge that I am seeking to participate in the voluntary Leadership activity ("activity") described on page 1 of this contract.

I further state that I am at least eighteen (18) years of age, fully competent to sign this Agreement, and am voluntarily seeking to participate in this activity (or in the case of students under the age of 18, I further state that I am the parent or legal guardian of the student identified below and am legally authorized to sign this form on behalf of the student who is voluntarily seeking to participate in this activity). I understand that by signing this document I am representing that I understand all its terms and conditions and fully intend to be bound by the same. I also understand that I may wish to consult with an attorney prior to signing this document.

I acknowledge that there may be certain dangers, hazards, and risks associated with my participation in this activity. I further acknowledge and understand that all risks cannot be prevented. If there are physical risks associated with this activity, I have consulted with my physician and/or health care provider to discuss whether my participation in the activity is appropriate given my current physical and mental health. Accordingly, I represent that I am physically and mentally able, with or without accommodation, to participate in this activity, and am capable of using the equipment, if any, associated therewith.

On behalf of myself and my family (including legal guardians) I agree to assume all the risks and responsibilities surrounding my participation in this activity, and agree to release from liability and waive any legal action against Bristol Community College, its governing board, officers, agents, and employees (the parties), for personal injury, death, or property damage suffered by me while participating in this activity or while in transit to or from the premises where the activity is being conducted.

I understand and agree that the College may not provide or have medical services or personnel available at the location of the activity or on its campus. Therefore, should I require emergency medical treatment as a result of an accident or illness arising during this activity, I consent to such treatment. Further, I acknowledge that the College does not provide activity participants with health or accident insurance and I agree to be financially responsible for any medical bills incurred as a result of emergency medical treatment provided.

Further, I agree to comply with all rules and regulations included in the College's Student Handbook and all other rules as set forth by the College personnel during the activity.

I agree that this document shall be construed in accordance with the laws of the Commonwealth of Massachusetts. If any term or provision of this document shall be held illegal or unenforceable, the remaining terms and provisions shall remain in full force and effect.

\_\_\_\_\_  
*Student Signature*  
*(If under 18 years of age, parent or legal guardian signature)*

\_\_\_\_\_  
*Date*

***In case of an emergency, please contact:***

\_\_\_\_\_  
*Emergency Contact Name & Relationship to Student*

\_\_\_\_\_  
*Emergency Contact Number*

**III. MEDIA AND PHOTO RELEASE**

*I give permission, without restriction, to Bristol Community College to (check all that apply):*

- Photograph me
- Videotape me
- Audio record me
- Quote me
- Use a copy of my writing

I hereby consent, for any and all purposes, to reproduction and/or use of the media noted above by Bristol Community College in any form and in any medium, including advertising, display, or any other use. I hereby release Bristol Community College, the Commonwealth of Massachusetts, and their employees and agents, from and against any liability, including liability for negligence, arising out of or in any way connected to Bristol Community College's use of the materials noted above.

\_\_\_\_\_  
*S-L Student Signature*  
*(If under 18 years of age, parent or legal guardian signature)*

\_\_\_\_\_  
*Date*