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**From:** NCTQ Document Collection <records@nctq.org>  
**Sent:** Wednesday, October 25, 2017 10:02 AM  
**To:** Staton, Jennifer A  
**Cc:** Foster, James H  
**Subject:** Re: FW: Open Records Request for Beaufort County School District

Thank you for sending this material. We will let you know if we have any questions or require further assistance. Thank you.

Michelle Linett on behalf of Laura Pomerance  
Senior Analyst  
Teacher Preparation Studies  
National Council on Teacher Quality  
1120 G Street NW, Suite 800  
Washington, DC 20005  
Email: [records@nctq.org](mailto:records@nctq.org)  
Phone: (202) 393-0020, ext. 118

On Tue, Oct 24, 2017 at 10:22 AM, Staton, Jennifer A <[Jennifer.Staton@beaufort.k12.sc.us](mailto:Jennifer.Staton@beaufort.k12.sc.us)> wrote:

Dear Ms. Pomerance-

Please see the attached. We do not have any handbooks of student teaching.

Jennifer Staton, MS, CSP  
Risk Manager  
Beaufort County School District  
[843-322-2355](tel:843-322-2355) (w) | [843-812-6405](tel:843-812-6405) (m)

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**From:** Moss, Jeffrey C  
**Sent:** Monday, October 16, 2017 2:23 PM  
**To:** Staton, Jennifer A <[Jennifer.Staton@beaufort.k12.sc.us](mailto:Jennifer.Staton@beaufort.k12.sc.us)>  
**Subject:** FW: Open Records Request for Beaufort County School District

Jeffrey C. Moss, Ed.D.

Superintendent  
Beaufort County School District

2900 Mink Point Blvd

Beaufort, South Carolina 29901

[843-322-2326](tel:843-322-2326)

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**From:** Laura Pomerance [<mailto:records@nctq.org>]  
**Sent:** Monday, October 16, 2017 2:02 PM  
**To:** Moss, Jeffrey C <[Jeffrey.Moss@beaufort.k12.sc.us](mailto:Jeffrey.Moss@beaufort.k12.sc.us)>  
**Subject:** Open Records Request for Beaufort County School District

October 16, 2017

Mr Jeffrey Moss

Beaufort County School District

Dear Mr Moss:

The [National Council on Teacher Quality](#) (NCTQ) works to ensure that every child has an effective teacher. For that purpose, we collect information on the institutions that play a role in training future teachers.

To learn about how teacher preparation programs place their student teacher candidates, we request the following documents from Beaufort County School District as provided for by South Carolina Freedom of Information Act, South Carolina's regulation regarding public records:

1) One copy of any and all contracts, memoranda of agreement, memoranda of understanding, placement agreements, or like documents which the Beaufort County School District has entered into with any institution(s) of higher education during the 2016-2017 or 2017-2018 school years regarding placement of teacher candidates in student teaching arrangements in district schools.

2) One copy of any letters or documents received by the Beaufort County School District from institutions of higher education during the 2016-2017 or 2017-2018 school years requesting cooperating teachers and/or explaining the process by which cooperating teachers are selected.

3) One copy of each type of form returned by the Beaufort County School District to institutions of higher education during the 2016-2017 or 2017-2018 school years to provide information about cooperating teachers. Please do NOT send completed applications! Please send blank or redacted copies. We are seeking information about the forms or applications, not individual cooperating teachers.

4) One copy of any handbook regarding student teaching arrangements provided to the Beaufort County School District by any institution(s) of higher education during the 2016-2017 or 2017-2018 school years.

If you have questions about this request, please do not hesitate to get in touch with me via email or telephone.

I request that you produce this material in electronic format when possible. Please send files to me at [records@nctq.org](mailto:records@nctq.org).

Finally, I ask if you have no such documents, please inform me.

Thank you very much for your help.

Sincerely,

Laura Pomerance

Laura Pomerance

Senior Analyst

Teacher Preparation Studies

National Council on Teacher Quality

1200 G Street NW, Suite 800

Washington, DC 20005

Email: [records@nctq.org](mailto:records@nctq.org)

Phone:  [\(202\) 393-0020, ext. 118](tel:(202)393-0020)

**APPLIED LEARNING EXPERIENCE AGREEMENT**  
**between**  
**THE BOARD OF REGENTS OF THE UNIVERSITY SYSTEM OF GEORGIA**  
**by and on behalf of**  
**ARMSTRONG STATE UNIVERSITY**  
**and**  
**BEAUFORT COUNTY SCHOOL DISTRICT**

This is an Applied Learning Experience (hereinafter "A.L.E.") Agreement between **Beaufort County School District** (hereinafter referred to as the "Facility") and the **Board of Regents of the University System of Georgia, by and on behalf of Armstrong State University** (hereinafter referred to as the "Institution"). The Facility and Institution are collectively referred to as the "Parties."

**WHEREAS**, the Institution desires to obtain, and the Facility desires to provide, high quality applied learning experiences for the Institution's student participants, while at the same time enhancing the resources available to the Facility for providing care to its clients and patients;

**NOW, THEREFORE**, in consideration of the mutual covenants and promises contained herein, the receipt and sufficiency of which is hereby acknowledged by each Party, the Parties hereby agree as follows:

1. This Agreement applies to the following programs:

Speech Pathology

2. The Institution shall use its best efforts to provide the Facility with information concerning the number of student participants, student participants' departments and colleges, their courses of instruction, and their dates of participation at least thirty days prior to the beginning of the A.L.E. When the information is available, the Institution shall make best efforts to disclose student participants' names to the Facility prior to the beginning of the A.L.E. The Institution shall disclose to the Facility the number of faculty participants, as well as the faculty participants' names, departments and colleges at least fifteen days prior to the beginning of the A.L.E. The Facility shall promptly notify the Institution which student and faculty participants have been accepted to participate in the A.L.E. at the Facility. Although the Facility may decline to accept student or faculty participants, the Facility agrees that it shall provide the Institution with a written explanation for doing so.

3. Upon the Facility's receipt of the information identified in Section 2, it shall designate the classroom or conference space, Facility personnel, and other rooms or equipment appropriate for the A.L.E. The Facility shall promptly disclose these designations to the Institution. The Facility shall use its best efforts to provide additional rooms, equipment, and personnel as may reasonably be requested by the Institution. The availability of additional rooms, equipment, and personnel will be subject to availability, prior requests for those resources, and the Facility's obligations regarding its operation.
4. If one or more Preceptors are used as an integral part of the A.L.E. Agreement, evaluation by such Preceptors shall contribute to the overall evaluation of the student participant's practice competency. The Preceptors shall have appropriate licenses and degrees. The following are specific Preceptor requirements:

None

5. Institution's student and faculty participants have executed the following documents, which will be provided to Facility upon request:
  - Authorization for Release of Records and Information
  - Applied Learning Experience Agreement
  - Agreement Concerning Faculty Supervision of an Applied Learning Experience
6. The following individuals shall serve as the faculty/staff representative for the Institution and the contact person for the Facility:

Institution Faculty/Staff Representative:

Program:	College of Health Professions Armstrong State University
Name:	David Ward
Address:	11935 Abercorn St. Savannah, GA 31419
Telephone Number:	(912) 344-2565
Fax Number:	(912) 344-3435
Email:	david.ward@armstrong.edu

Facility Contact Person:

Facility Name: Beaufort County Schools  
Name(s): Jill McAden  
Address: PO Box 309  
Telephone Number: 843-322-2334  
Email: jill.mcaden@beaufort.K12.sc.us

In the event that a Party's representative or contact person changes, the Party shall promptly provide the other Party with updated information.

7. The Parties acknowledge and agree that all terms and conditions forming a part of the Memorandum of Understanding by and between Beaufort County Schools and the Board of Regents of the University System of Georgia, by and on behalf of Armstrong State University, dated September 20, 2016, as amended (the "MOU"), with the exception of Section A.2., are incorporated by reference into this Agreement and shall remain in full force and effect during its term. Notwithstanding the foregoing, in the event of any conflict in the terms of the MOU and this Agreement, the terms of this Agreement shall prevail.
8. Unless earlier terminated as provided herein, the Original Term of this Agreement shall be for a period of three years, commencing September 1, 2016, and ending August 31, 2019. Subsequent to the end of its Original Term, this Agreement shall automatically renew for Renewal Terms of one-year duration, unless, prior to the expiration of the Original Terms or any Renewal Term, either Party has notified the other in writing of its intention not to renew the Agreement.
9. This Agreement may be amended from time to time upon written consent of the both Parties. This Agreement may also be terminated at any time prior to the end of its Term by either Party upon not less than ninety days written notice to the other Party; provided, however, that in the event of such early termination any student participants then participating in an A.L.E. shall be allowed to complete their A.L.E.'s.

***Signatures appear on the following page.***

In witness whereof, the Parties have caused their authorized representatives to execute this Agreement.

THE BOARD OF REGENTS OF THE UNIVERSITY SYSTEM OF GEORGIA  
by and on behalf of  
ARMSTRONG STATE UNIVERSITY



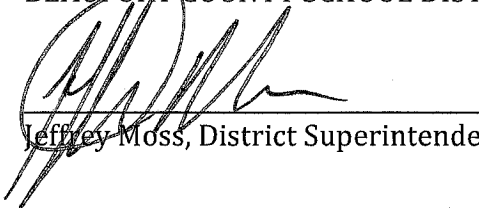
Linda Bleicken, President

September 20, 2016

Date

Approved as to form  
Armstrong State University  
Office of Legal Affairs  
E. Lee Davis, University Counsel  
2016.09.20

BEAUFORT COUNTY SCHOOL DISTRICT



Jeffrey Moss, District Superintendent

9-26-16

Date



## **FIELD EXPERIENCE AND INTERNSHIP AGREEMENT**

This Agreement is made and entered into on the 11<sup>th</sup> day of May, 2017 by and between the Board of Regents of the University System of Georgia by and on behalf of Armstrong State University (hereinafter referred to as "Armstrong") and Beaufort County School System (hereinafter referred to as "School System").

**WHEREAS**, Armstrong offers several programs of study in Education requiring the completion of internships, and;

**WHEREAS**, Armstrong students complete internships at various schools to the benefit of Armstrong, its students, and the schools, and;

**WHEREAS**, School System desires to participate in Armstrong's internship programs;

**NOW, THEREFORE**, in consideration of the mutual promises, covenants, and conditions stated herein, the Parties hereby agree as follows:

### **School System's duties:**

During each internship, the School System will provide an internship placement to each participating student in accordance with the type of internship or field experience:

- Observation. School System will permit participating students to observe regular classroom work and other activities of the School System's staff. The time and place of such observations will be adjusted to suit the schedules and conditions at the School. Group observations may be permitted by arrangement between Armstrong and the School System.
- Participation and Exploratory Teaching. Participating students may be assigned to specific teachers and specific school situations for participation and exploratory teaching activities by prior arrangement with the School System. Participating students will assist teachers, administrators, or pupils in various activities as directed by the School System, but will assume only those responsibilities which the School System delegates to them. When performing such delegated duties, participating students shall be under the direction of School System personnel. Participating students are expected to provide useful assistance to the School System.

- Special Field Studies and Research Projects. Participating students will carry out special field studies and research projects, and will provide special services for groups and individual pupils. The details of such studies and projects will be subject to prior approval by the School System and Armstrong.
- Responsible Student Teaching (Internship II). Participating students will be placed in student teaching assignments as directed by the School System. Student teachers will be supervised jointly by the School System (through the assigned cooperating teacher) and Armstrong, but shall always be under the direction of the School System. After a reasonable period of orientation, the cooperating teacher shall delegate increasing responsibility to the student, as the student demonstrates the capacity to carry such responsibility; however, the student shall be under the immediate supervision and direction of the cooperating teacher.

The supervision of a participating student in any internship activity will be administered by selected employees of School System and Armstrong. Notwithstanding the foregoing, the School System shall retain full authority to direct all School System activities. Participating students shall be required to observe all policies of the school at which he or she is placed, including, but not limited to, confidentiality policies, conduct codes, dress codes, and other policies of general application to the school's employees.

**Armstrong's duties:**

Armstrong shall:

- ensure that each participating student is provided with appropriate credentials, signed by Armstrong's Director of the Office of Field Experience, Clinical Practice and Partnerships, which will specify the type of work in which the student will engage, the duration of the assignment, and the School employee or employees who will supervise and direct the participating student. Armstrong will clear all types of internships with the School System prior to the participating student's arrival.
- cooperate with the School System to determine the number of participating students who will be assigned to each of the schools of the School System.
- ensure that each participating student has cleared a background check or a Georgia Professional Standards Commission (GaPSC) Pre-Service certificate.

- ensure that each participating student is required to carry professional tort liability insurance in a policy amount of not less than \$1,000,000.

**General terms and conditions:**

The Term of this Agreement shall begin on the day and date entered above, and shall end on the last day of the last summer session Armstrong offers the following year.

Either Party may terminate this Agreement at any time prior to its ending date by providing to the other Party written notice of its intention to terminate the Agreement early at least ninety days prior to the intended termination date. Notwithstanding the foregoing, the Parties will cooperate in good faith to provide students currently engaged in internships an opportunity to complete them, if possible.

This Agreement may be amended by mutual written consent of the Parties.

The Parties acknowledge and agree that participating students are employees neither of the School System nor of Armstrong. Armstrong employees, while carrying out their duties as assigned by Armstrong in support of internships on School System premises, are acting within the scope of their employment at Armstrong, and are therefore covered under Armstrong's Georgia Tort Claims Act coverage to a maximum of \$1,000,000 per person and \$3,000,000 per occurrence, in addition to Armstrong's worker's compensation coverage. Such Armstrong employees are acknowledged not to be employees, agents, or contractors of the School System in any capacity.

The School System may, in its sole discretion, terminate the internship of any participating student. Armstrong reserves the right to withdraw any participating student from an assigned internship in its sole discretion.

Neither Party shall discriminate against any participating student, any student of the School System, or any employee of either Party on the basis of such person's race, ethnicity, sex, sexual orientation, religion, creed, national origin, age, veteran's status, or disability; provided, however, that with respect to disability, the disability must not be such as would, even with reasonable accommodation, in and of itself, preclude the student's effective participation in the internship.

The parties acknowledge that the Board of Regents of the University System of Georgia has determined that Armstrong State University will be consolidated with another institution of the University System of Georgia, namely Georgia Southern University, and that the resulting institution will be known as Georgia Southern University. The parties hereby agree that at the time of the consolidation of Armstrong State University and Georgia Southern University, the resulting Georgia Southern University shall be automatically substituted as the Institution in this Agreement, with all other provisions remaining as written.

In witness whereof, the Parties have caused their authorized representatives to execute this Agreement.

This Agreement shall be subject to the laws of the State of Georgia, without regard to choice of law provisions.

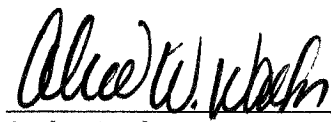
In witness whereof, the Parties have caused their respective duly authorized representatives to execute this Agreement on their behalf.

THE BOARD OF REGENTS OF THE UNIVERSITY SYSTEM OF GEORGIA  
by and on behalf of  
ARMSTRONG STATE UNIVERSITY

  
Linda Bleicken, President

SCHOOL SYSTEM:

Beaufort County School System

  
Authorized representative

  
Print Name and Title

Approved as to form  
Armstrong State University  
Office of Legal Affairs  
E. Lee Davis, University Counsel  
2017.05.11

**MEMORANDUM OF UNDERSTANDING**  
**between**  
**THE BOARD OF REGENTS OF THE UNIVERSITY SYSTEM OF GEORGIA**  
**by and on behalf of**  
**ARMSTRONG STATE UNIVERSITY**  
**and**  
**BEAUFORT COUNTY SCHOOL DISTRICT**  
**SEPTEMBER 20, 2016**

This is a Memorandum of Understanding on the part of **Beaufort County School District** (hereinafter referred to as the "Facility"), located at 2900 Mink Point Blvd., Beaufort, South Carolina 29902 and the **Board of Regents of the University System of Georgia, by and on behalf of Armstrong State University** (hereinafter referred to as the "Institution"), located at 11935 Abercorn Street, Savannah, GA 31419. The Facility and Institution are collectively referred to as the "Parties."

**A. PURPOSE:**

1. The purpose of this Memorandum of Understanding ("MOU") is to guide and direct the Parties respecting their affiliation and working relationship, inclusive of anticipated future arrangements and agreements in furtherance thereof, to provide high quality applied learning experiences for the Institution's students.
2. Neither Party intends for this MOU to alter in any way their respective legal rights or their legal obligations to one another, to the students and faculty assigned to the Facility, or to any third party. However, the understandings contained herein may be incorporated into and made a part of a subsequent agreement executed between the Institution and Facility in a form substantially similar to that which is attached hereto and hereby incorporated by reference as Exhibit "A" (hereinafter referred to as the "Agreement").

**B. GENERAL UNDERSTANDING:**

1. The applied learning experience (hereinafter referred to as the "A.L.E.") shall be of such content, and cover such periods of time, as may from time to time be mutually agreed upon by the Parties. The starting and ending dates for each A.L.E. shall be agreed upon at least one month before the A.L.E. commences. A.L.E. implementation at the Facility shall be subject to final approval by the Facility.

2. The number of students designated for participation in the A.L.E. shall be mutually determined by agreement of the Parties, and may at any time be altered by mutual agreement. All student participants must be acceptable to both Parties. Either the Facility or the Institution may withdraw any student from an A.L.E. at the Facility based upon a lack of competency on the part of the student, the student's failure to comply with the rules and policies of the Facility, or for any other reason where either Party reasonably believes that it is not in their best interest for the student to continue. Such Party shall provide the other Party and the student with immediate notice of the withdrawal and written reasons for the withdrawal.
3. Neither Party shall discriminate on the basis of race, national origin, religion, creed, sex, sexual orientation, age, disability, or veteran's status in either the selection of students for participation in the A.L.E., or as to any aspect of the A.L.E.; provided however, that with respect to disability, the disability must not be such as would, even with reasonable accommodation, in and of itself, preclude the student's effective participation in the A.L.E.
4. If the Facility provides services at multiple locations, the terms of this MOU and of the attached Exhibit "A" shall apply to students placed with Facility approval at any of those locations.

**C. FACILITY'S RESPONSIBILITIES:**

1. The Facility shall retain responsibility for the care of its clients and patients and shall maintain supervision of students insofar as their presence and A.L.E. assignments affect the operation of the Facility and its care, direct and indirect, of its clients and patients. No provision of this Relationship shall prevent any Facility client or patient from requesting not to be a teaching client or patient, or prevent any member of the Facility's staff from designating any client or patient as a non-teaching client or patient.
2. The Facility shall provide adequate facilities for participating students in accordance with the A.L.E. program objectives and plan, developed through cooperative planning by the Institution's departmental faculty and the Facility's staff. The Facility shall use its best efforts to make conference space and classrooms available as may be necessary for teaching and planning activities in connection with the A.L.E. Specific classroom, conference space and facility requirements may be set forth in the Agreement.

3. Facility staff shall, upon request, assist the Institution in the evaluation of the learning and performance of participating students, provided the student has signed a consent to release of educational information in accordance with the Family Educational Rights and Privacy Act of 1974, as amended (FERPA). However, the Facility hereby agrees to keep confidential any student records or information it may obtain, unless it has otherwise obtained prior written consent of the student to disclose student records or information to other parties. The Institution shall obtain all required consents, and the Facility shall have the right to rely on such consents and to obtain copies of such consents upon request. Unless otherwise specified in the Agreement, any evaluation of students by the Facility shall relate only to general student participation in the A.L.E., and shall in no way be construed as a certification by the Facility as to the competence of any student or a representation by the Facility of any student's ability or competence in connection with the practical implementation of any knowledge gained through the A.L.E.
4. The Facility shall provide for the orientation of both Institution faculty and participating students as to the philosophies, rules, regulations and policies of the Facility.
5. Subject to the Facility's overall supervisory responsibility for patient care, appropriately licensed faculty members of the Institution may provide such patient services at the Facility as may be necessary for teaching purposes. The nature and scope of activities of Institution faculty members that may involve in any way patient care at the Facility shall be subject to the sole discretion of the Facility and to such conditions as the Facility may deem necessary in its sole discretion including, but not limited to, prior proof of professional liability coverage, appropriate licensure or certification, and compliance with all Facility rules, regulations, and policies. If faculty participation at the Facility other than as a Supervisor for the purpose of this A.L.E. is so authorized, it shall not be a substitute for adequate staffing at the Facility.
6. All medical or health care (emergency or otherwise) that an Institution student or faculty member receives at the Facility shall be at the expense of the patient.

**D. INSTITUTION'S RESPONSIBILITIES:**

1. The Institution shall use its best efforts to select students for participation in the A.L.E. who are prepared for effective participation in the training phase of their overall education. The Institution shall retain ultimate responsibility for the education of its students.

2. Prior to the commencement of the A.L.E., the Institution shall, upon request and with proper authorization, provide responsible Facility officials with such student records as will adequately disclose the prior education and related experiences of prospective student participants.
3. The Institution shall use its best efforts to see that the A.L.E.'s at the Facility are conducted in such a manner as to enhance the resources available to the Facility for the providing of care to its clients and patients. Only those students who have satisfactorily completed the prerequisite courses of their curriculum shall be selected for participation in an A.L.E., as specified in the curriculum course descriptions.
4. The Institution shall not assign any faculty member to the Facility in connection with the operation of the A.L.E. who is not appropriately licensed or certified, and shall make evidence of the licensure or certification of all its assigned faculty available to the Facility upon request. It is agreed that all Institution faculty are employees of the Institution, unless otherwise agreed upon in writing.
5. The Institution shall inform all its participating students of the Facility's requirement that they must procure and maintain throughout the A.L.E. professional liability insurance in amounts, form, and by a carrier satisfactory to the Facility and the Institution, and covering their activities at the Facility, and to provide evidence of such insurance to the Facility prior to participation in any A.L.E. Institution faculty members are covered pursuant to the terms and conditions of the Georgia Tort Claims Act (O.C.G.A. §§ 50-21-20 *et seq.*). The Institution shall provide Worker's Compensation Insurance coverage for its participating faculty members. However, the Institution shall not provide Worker's Compensation Insurance or other insurance coverage for its students. This paragraph shall survive the termination of this MOU.
6. The Institution shall encourage participating student and faculty members to comply with the Facility's rules, regulations and procedures, and use its best efforts to keep students and faculty informed as to those regulations and procedures as well as and any changes to them. Specifically, the Institution shall keep each participating student and faculty member apprised of his or her responsibilities, including but not limited to the following:
  - a. to follow the administrative policies, standards, and practices of the Facility when in the Facility.
  - b. to report to the Facility on time and to follow all established regulations of the Facility.



- c. to keep in confidence all medical, health, financial and social (including mental health) information pertaining to particular matters, clients, or patients.
- d. not to publish any material related to the A.L.E. that identifies or uses the name of the Institution, the Board of Regents of the University System of Georgia, the Facility or their respective members, clients, patients, students, faculty or staff, directly or indirectly, unless prior written permission is first received from the Institution, the Board of Regents of the University System of Georgia, and the Facility. However, the Facility hereby grants to the Institution the right to publish Institution administrative materials such as catalogs, course syllabi, A.L.E. reports, etc. that identify or uses the name of the Facility or its members or staff, directly or indirectly.
- e. to comply with all federal, state and local laws regarding the use, possession, manufacture or distribution of alcohol and controlled substances.
- f. to follow Centers for Disease Control and Prevention (C.D.C.) Universal Precautions for Blood Borne Pathogens, C.D.C. Guidelines for Tuberculosis Infection Control, and Occupational Safety and Health Administration (O.S.H.A.) Respiratory Protection Standards.
- g. to arrange for and be solely responsible for living accommodations while at the Facility.
- h. to comply with established standards and practices while training at the Facility.
- i. to provide the necessary and appropriate uniforms and supplies required where not provided by the Facility.
- j. to wear a name tag that clearly identifies himself or herself as a student or faculty member of the Institution.
- k. to sign a written agreement obligating the student or faculty member to observe all rules and policies established by the Facility, to maintain the confidentiality of patient information, and to refrain from publishing any material related to the A.L.E. that identifies or uses of the name of the Board of Regents of the University System of Georgia, the Institution, or the Facility, directly or indirectly, or uses the name of the Facility, without first obtaining written approval, subject to the right to publish set forth in section d above.

7. The Institution shall require all student participants at the time of enrollment in the A.L.E., if required by Facility and as necessary and appropriate during the period of participation, to undergo a health examination to determine that they are free from infectious or contagious diseases, and are able to perform their activities in the A.L.E. program, and to in ensure that they do not pose a direct threat to the health or safety of others. Such examinations may include, but are not limited to, TB tests, PPD tests, chest x-rays, hepatitis-B core antibody tests, rubella/measles/mumps tests, or checks for documentation of immunization. At the option of the Facility, such health examinations may be performed by the Facility, at the sole expense of the student participants. Any student or faculty participant who does not meet the health criteria established by the Facility shall not be assigned to the Facility or allowed to continue to participate in the A.L.E. at the Facility. The Facility may, at any time, request health status reports on student and faculty participants, to the extent allowed by law. Moreover, if the student or faculty member has an exposure to blood or body substances, if there is an injury to the student or faculty member, or if there is an infectious disease outbreak, the Institution agrees, to the extent allowed by law, that it shall provide the student or faculty member's health records to the Facility within two (2) business days of the receipt of a written request by the Facility for such health records.
8. The Institution shall have the full responsibility to conduct any student or faculty disciplinary proceedings it deems necessary, and shall conduct such proceedings in accordance with its policies.
9. The Institution shall assign a faculty/staff representative as liaison between the Facility and the Institution. The Institution faculty/staff representative shall be designated in the Agreement.

**E. MUTUAL RESPONSIBILITIES:**

1. The Parties shall work together to maintain an environment of quality learning experiences for the Institution's student participants, while at the same time enhancing the resources available to the Facility for providing care to its clients and patients. At the request of either Party, a meeting or conference shall be held between Institution and Facility representatives to resolve any problems or develop any improvements in the operation of the A.L.E.
2. The working relationship and affiliation described in this MOU shall be reviewed annually by the Parties. This MOU may be amended at any time by mutual written agreement of the Parties. It may also be terminated at any time by either Party upon not less than ninety (90) days written notice to the other Party; provided, however, that any students currently in an A.L.E. at the Facility may complete the A.L.E.

3. The Institution and the Facility acknowledge and agree that neither Party shall be responsible for any loss, injury or other damage to the person or property of any student or faculty member participating in the A.L.E. unless such loss, injury or damage results from the negligence or willful conduct of that Party, its agents, officers or employees.
4. This relationship is intended solely for the mutual benefit of the Parties, and there is no intention, express or otherwise, to create any rights or interests for any party or person other than Facility and the Institution; without limiting the generality of the foregoing, no rights are intended to be created for any patient, client, student, parent or guardian of any patient, client, student, spouse, next of kin, nor any employer or prospective employer of any student.
5. Neither Party is an agent, employee, partner, joint venturer, or servant of the other. The Parties acknowledge and agree that student participants in the A.L.E. are not employees of either Party by reason of such participation, and that neither Party assumes any responsibilities as to the student participants that may be imposed upon an employer under any law, regulation or ordinance. Student participants shall be expected not to represent themselves hold as employees of either Party.
6. Reserved.
7. This MOU and the Agreement shall be governed by, construed, and applied in accordance with the laws of the State of Georgia.
8. This MOU shall supersede any and all previously executed Memoranda of Understanding, contracts, or agreements between the Parties for applied learning experiences.

***Signatures appear on the following page.***

In witness whereof, the Parties have caused their authorized representatives to execute this Memorandum of Understanding.

THE BOARD OF REGENTS OF THE UNIVERSITY SYSTEM OF GEORGIA  
by and on behalf of  
ARMSTRONG STATE UNIVERSITY



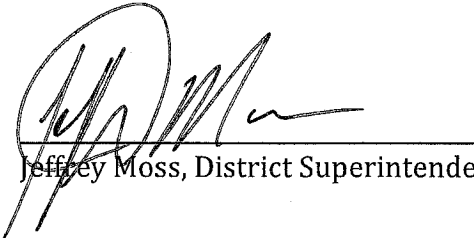
Linda Bleicken, President

September 20, 2016

Date

Approved as to form  
Armstrong State University  
Office of Legal Affairs  
E. Lee Davis, University Counsel  
2016.09.20

BEAUFORT COUNTY SCHOOL DISTRICT



Jeffrey Moss, District Superintendent

9-26-16

Date

# Beaufort County School District Online Application

Date Submitted: 9/6/2017

## Personal Data

**Name:** [Redacted] [Redacted] [Redacted] [Redacted]  
(Title) (First) (Middle Initial) (Last)

Other name(s) under which transcripts, certificates, and former applications may be listed:

**Other:** [Redacted] [Redacted] [Redacted] [Redacted]  
(Title) (First) (Middle Initial) (Last)

**Email Address:** eogrady@email.uscb.edu

## Postal Address

### Permanent Address

Number & Street: [Redacted]  
Apt. Number: [Redacted]  
City: [Redacted]  
State/Province: [Redacted]  
Zip/Postal Code: [Redacted]  
Country: United States of America  
Daytime Phone: [Redacted]  
Home/Cell Phone: [Redacted]

### Present Address (until Early May)

Number & Street: [Redacted]  
Apt. Number: [Redacted]  
City: [Redacted]  
State/Province: [Redacted]  
Zip/Postal Code: [Redacted]  
Country: United States of America  
Phone Number: [Redacted]

## Employment Desired

Open Vacancies Applied For:	Date Last Submitted	Experience in Similar Positions
JobID: 3056 <b>Student Teaching:</b> Clinical University Experience	9/6/2017	-

## Date of Birth

Please provide your date of birth.

\* Date of Birth: (mm/dd/yyyy)

## Supplemental Materials

District administrators request the following items be added to your application. Click "Add File" to submit an electronic copy of this information.

**Proof of Student Liability Insurance**

**TB Test Results**

## Legal Information

Please note: Applicants are not obligated to disclose sealed or expunged records.

\* Are you eligible to work in the United States?

\* Have you ever been arrested, charged or convicted of any type of a criminal offense? (This includes traffic/movement violations as well.)

If yes, explain and provide dates:

# Beaufort County School District Online Application

Date Submitted: 9/6/2017

## Legal Information continued

Please Note: A conviction will not necessarily bar you from employment. Facts, such as date of occurrence and rehabilitation will be considered. This information will be used only for job-related purposes and only to the extent permitted by applicable law.

\* Have you ever had any indicated finding of child abuse filed in your name?

No

If yes, explain, giving dates:

\* Does your name appear on any Sex Offender Database within the United States or "Other" Country?

No

## Equal Opportunity Employer

Beaufort County School District is an Equal Opportunity Employer. Beaufort County School District ensures equal employment opportunities regardless of race, creed, gender, color, national origin, religion, age, sexual orientation or disability. Beaufort County School District has a policy of active recruitment of qualified minority teachers and non-certified employees. Any individual needing assistance in making application for any opening should contact the Department of Human Resources.

## Applicant's Acknowledgment and Agreement

By checking the box below, I declare that all statements contained in this application are true and that any misrepresentation or omission is cause for rejection of my application to be employed or volunteer.

In connection with my application for employment, my continued employment, or in connection with my desire to engage in volunteer activities, I have been advised and I hereby consent and authorize Beaufort County School District and its agent, at any time during or subsequent to my application process, to conduct an investigative consumer report that may include, but are not limited to, a criminal record check, employment and education verifications, personal references; personal interviews; my personal credit history; and driving record.

I do hereby consent to Beaufort County School District's use of any information provided on this form or during the application process in performing the investigative consumer report. Beaufort County School District has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer employment or volunteer opportunities. I agree to release, indemnify and hold harmless Beaufort County School District and any reporting agency used with regard to any information reported by the reporting agency. According to the Fair Credit Reporting Act, I am entitled to know if employment or the opportunity to volunteer is denied because of information obtained from a consumer reporting agency. If so, I will be notified and given the name, address, and phone number of the agency which provided the information. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of Beaufort County School District. Under the Fair Credit Reporting Act, I have been advised that upon request I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information. I acknowledge that facsimile, copy or email shall be as valid as the original.

I hereby authorize Beaufort County Schools to conduct a personal and professional background check for the purposes of my application of employment/volunteering at Beaufort County Schools. Beaufort County Schools may contact any references, past and current employers, church, youth organizations, agencies where volunteer service has been completed, and any individual or organization which might be relevant to my desired position. I hereby release all of the above stated persons from any and all liability for damages that might occur during the Beaufort County Schools contact with the individuals for purposes of employment or volunteer services.

# Beaufort County School District Online Application

Date Submitted: 9/6/2017

I understand that confidential information about a student may be shared with me. I further understand that any information about a student is not to be discussed with anyone other than the teacher or other staff members responsible for the education of the student.

I also hereby give complete permission for Beaufort County Schools to conduct a criminal background check, arrest records check, abuse registry check, and driving record check for the purposes of employment/volunteering. I further acknowledge that an offer of employment is contingent upon receiving a clear criminal background report.

I waive any right that I may have to inspect any information provided about me by the persons previously mentioned. I have also read and understood the above stated information within this release and am signing below of my own free will. I understand that a criminal background check will be conducted prior to and during my service and that an offer of employment is contingent upon a clear criminal background report. I authorize investigations of all statements contained within my application. I agree to observe all of Beaufort County School's guidelines and policies.

I UNDERSTAND AND ACKNOWLEDGE THAT THE BEAUFORT COUNTY SCHOOL DISTRICT EXPECTS EMPLOYEES TO MAINTAIN A PROFESSIONAL RELATIONSHIP WITH STUDENTS AT ALL TIMES. NO EMPLOYEE WILL ENGAGE IN IMMORAL OR CRIMINAL CONDUCT OR COMMIT OR ATTEMPT TO INDUCE STUDENTS OR OTHERS TO COMMIT AN ACT OR ACTS OF IMMORAL OR CRIMINAL CONDUCT. IF IT APPEARS AN EMPLOYEE MAY HAVE VIOLATED THE LAW, THE DISTRICT WILL COOPERATE WITH THE LAW ENFORCEMENT AGENCIES.

I declare that I have not perpetrated physical abuse, sexual abuse, emotional abuse, or neglect against a minor or a vulnerable adult and that I have never been accused of these acts. I understand that I can withdraw my application from the employment/volunteer process at any time. I understand and agree that false statements and/or omissions regarding past conduct and/or present situation may be grounds for denial to be employed or serve as a volunteer and that refusal to inform Beaufort County Schools of the contents of a sealed criminal record will result in the automatic denial of my employment/volunteer application.

I, [REDACTED], agree to all of the terms above.

I agree

## Clinical University Experiences

\* Applying for Program Level:

Observation

\* Certification Program Area of Study:

Early Childhood (PK-3)

Other:

\* Preferred Geographical Area:

Bluffton

**SCHOOL PREFERENCES: (Select 3 Schools)**

**Elementary Schools:**

Bluffton Elementary

M. C. Riley Elementary

Red Cedar Elementary

**Middle Schools:**

**High Schools:**

## Clinical University Experiences continued

* Program Start Date:	09/21/2017
* Program End Date:	11/30/2017

## University Program Supervisor Information

Please fill in your University Supervisor's information:

* Name:	Rachel Burns
* University/College:	USCB
* Current Position/Title:	Assistant Professor
* Work Phone:	(843) 208-8207
* Email Address:	harveyr@uscb.edu



# LUTHER COLLEGE

## Memorandum of Understanding 2017 – 2018

### **Beaufort County School District**

This contract is made and entered into between Luther College, Education Department, 700 College Drive, Decorah, Iowa 52101 and Beaufort County School District, 2900 Mink Point Blvd. Beaufort, SC 29902.

#### *PROVISIONS:*

1. Luther College and Beaufort County School District agree to participate, if placements are available in the district, in a clinical field experience program, which includes, but is not limited to: student teaching, student observations, and other field experiences.
2. Luther College will provide supervision, by one or more Luther faculty member(s) or a credentialed specialist in education, for students participating in clinical field experiences that are placed in Beaufort County School District.
3. Student teachers and other field experience enrollees of the Luther College Education Department are to comply with all the contracted school district's rules, regulations, and policies. Termination or change in assignment will be the option of Beaufort County School District, as well as the option of Luther College, should circumstances warrant such an action.
4. Cooperating teachers must have at least three years of teaching experience in the appropriate subject area. It may not be their first year in their current assignment/building.
5. Luther College's clinical field experience program requires all students to be screened for any history of criminal behavior. Students are required to follow the guidelines set by Beaufort County School District for this process. If the school does not have a system in place by which the student can complete this requirement, Luther College will process an extensive National background check for the student. The student will be required to pay the processing fee and submit the completed report to Beaufort County School District. This background check will include:
  - National Sex Offender Registry
  - National Criminal Database
  - Criminal Search – County
  - ID Trace Pro
6. Beaufort County School District and Luther College agree to provide equal educational opportunities and equal access to facilities for all qualified persons. To not discriminate in employment, educational programs, and activities on the basis of age, color, creed, disability, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, veteran status, or any other basis protected by federal or state law. This commitment includes the provision of a campus environment that is free from discrimination and harassment. The college will not tolerate any form of illegal discrimination or harassment and will not condone any actions or words that constitute such.

7. Luther College pays cooperating teachers a stipend for each student placed in a clinical field experience. Payment is to be made at the end of each semester after the Luther College Education Department receives the completed Student Teacher Evaluation from the cooperating teacher. Payment for a student teacher who has withdrawn prior to the middle of the term shall be one-half of the normal reimbursement with payment to be made at the end of the period.

- January Term beginning practicum (EDUC 185 & EDUC 215) - \$75
- January Term developing practicum (Methods) - \$100
- Student teaching
  - 4 weeks - \$100
  - 6-9 weeks - \$175

Luther College will send the stipend payment to the cooperating teacher's home address.

Please check here if Beaufort County School District requires that payment be sent directly to the District.

Signature: Alice W. Weber Date: 10/10/17  
Representative, Beaufort County School District

Signature: Barbara Botach Date: 10/6/17  
Department Chair, Luther College Education Department

Signature: Kevin Kraus Date: 10/5/17  
Academic Dean, Luther College

## **Memorandum of Understanding**

### **Partnership**

#### **University of South Carolina at Beaufort and Pritchardville Elementary**

This memorandum of understanding is entered between the University of South Carolina at Beaufort and Pritchardville Elementary School for Spring semester 2017.

#### **Vision of the Partnership**

To create a university-school partnership that will focus on student learning and educator preparation through the engagement of collaborative learning communities involving district and university students and faculty

#### **Mission**

Simultaneous renewal and support of preschool through college education, practicing educators, and educator preparation

#### **Goals**

- 1) improve academic achievement of students in the partner school,
- 2) facilitate professional learning for school and university faculty and teacher candidates,
- 3) strengthen the preparation of pre-service teacher candidates, and

#### **The university will:**

- Provide access to a university liaison to facilitate communication and collaboration
- Collaborate to determine extent to which the partnership is working and report to both university and partner school stakeholders.

#### **The partner school will:**

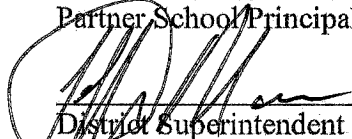
- Maintain a school-wide commitment to a one-semester relationship.
- Facilitate instruction in the social studies methods;
- Provide a school liaison (teacher or school leader) to help facilitate partnership-related activities;
- Collaborate to determine extent to which the Partnership is working and report to both university and partner school stakeholders.

#### **Terms of Agreement and Termination**

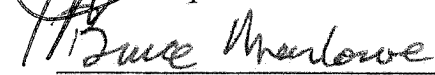
This agreement addresses cooperation in the USCB-Pritchardville partnership between the undersigned Partner School and the USCB Department of Education. This agreement is effective for three years (2016-2019) and subject to annual review. Termination of the agreement may be initiated by either party through written notice at least 90 days prior to the end of the school district semester and is subject to completion of the entire semester.

\_\_\_\_\_  
Partner School Principal


\_\_\_\_\_  
Date

  
\_\_\_\_\_  
District Superintendent or Designee

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Chair, USCB Department of Education

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Chancellor, University of South Carolina Beaufort

\_\_\_\_\_  
Date

1-20-17

1/11/17

1/17/16

I, as the Director of this program, give my permission for this student to observe this classroom and/or child while at the above mentioned center.

\_\_\_\_\_  
(Director print name)

\_\_\_\_\_  
(Director Signature)

\_\_\_\_\_  
(Director Phone Number)

\_\_\_\_\_  
(Director email address)

Dear Family Member/Guardian (Director's, please feel free to share with parents, if needed.):

I will be visiting your child's classroom at least 90 minutes over the semester for the purpose of learning more about child development. I will be making written notes on my observations. All observations will only note children by initials or some other anonymous designator to guard their confidentiality. These will be for practice only, not for any other purpose, and the only person who will see them is my instructor.

STUDENTS NAME: \_\_\_\_\_

CLASS ENROLLED AT TCL: FCD 106, 203

CENTER OR SCHOOL: \_\_\_\_\_

PHONE: \_\_\_\_\_ SEMESTER/YEAR SP17

Present to Parent, Teacher, or Director for signature below

College Name: Technical College of the Lowcountry  
 Instructor Name: Kelli Boniecki, M.Ed.  
 Phone: 843-525-8307 Email: kboniecki@tcl.edu

# PERMISSION TO OBSERVE

TECHNICAL COLLEGE OF THE LOWCOUNTRY



~~10/10/17~~  
~~10/10/17~~

Technical College of the Lowcountry  
FEDERAL WORK-STUDY OFF CAMPUS AGREEMENT

This agreement is entered into between The Technical College of the Lowcountry, hereinafter known as the "Institution", and Beaufort County School District, hereinafter known as the "Organization", a local non-profit organization, for the purpose of providing work to students eligible for the Federal Work-Study Program (FWS).

Schedules to be attached to this agreement from time to time must be signed by an authorized official of the institution and the organization and must set forth –

1. brief descriptions of the work to be performed by students under this agreement;
2. the total number of students to be employed;
3. the hourly rates of pay; and
4. the average number of hours per week each student will be able to work.

These schedules will also state the total length of time the project is expected to run, the total percent, if any, of student compensation that the organization will pay to the institution, and the total percent, if any, of the cost of employer's payroll contribution to be borne by the organization. The institution will inform the organization of the maximum number of hours per week a student may work.

Students will be made available to the organization by the institution to perform specific work assignments. Students may be removed from work on a particular assignment or from the organization by the institution, either on its own initiative or at the request of the organization. The organization agrees that no student will be denied work or subjected to different treatment under this agreement on the grounds of race, color, national origin, or sex. It further agrees that it will comply with the provisions of the Civil Rights Act of 1964 (Pub. L. 88-352; 78 Stat. 252) and Title IX of the Education Amendments of 1972 (Pub L. 92-318) and the Regulations of the Department of Education which implement those Acts.

The Federal Work-Study student must be supervised responsibly by the Organization and by Federal regulations, may not perform work:

- a. which displaces regular employees;
- b. which impairs existing service contracts;
- c. which fills a vacancy caused by a strike;
- d. for an elected official outside the regular administration of federal, state, or local government;
- e. which involves partisan or non-partisan political activity;
- f. which involves lobbying at the federal level;
- g. which takes into account a student political support or party affiliation
- h. which involves the construction, operation or maintenance of a facility used for sectarian instruction or as a place of religious worship;
- i. which primarily benefits the members of a limited membership organization (e.g., credit union, cooperative, fraternal or religious order, etc.);
- j. connected with an institution's non-related profit making activities (e.g. outside rental of athletic fields, auditoriums, etc.)
- k. or for the Department of Education.

Both the Institution and the Organization will not be responsible for providing transportation for students to and from their work assignments.

The institution is considered the employer for the purposes of this agreement. It has the right to control and direct the services of the students, not only as to the result to be accomplished, but also as to the

means by which the result is to be accomplished. The Institution is limited to determining whether the students meet the eligibility requirements for employment under the Federal Work-Study Program, to assigning students to work for the organization, and to determining that the students do perform their work in fact.

The Organization is responsible for daily verification of the students hours worked, the Student is responsible for turning the proper paperwork in at each pay period for reimbursement and the Institution is responsible for payroll disbursements to the student.

REPRESENTATIVES

Melanie S. Gallion  
PRINTED NAME - INSTITUTION

TCL  
SIGNATURE -- INSTITUTION

Jeffrey Moss  
PRINTED NAME - ORGANIZATION

[Signature]  
SIGNATURE - ORGANIZATION

DATE OF APPROVAL

9-20-16  
DATE

9-20-16  
DATE

SCHEDULE FOR FEDERAL WORK-STUDY OFF CAMPUS AGREEMENT

A. BRIEF DESCRIPTION OF THE WORK TO BE PERFORMED BY STUDENTS UNDER THIS AGREEMENT:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_
- 6) \_\_\_\_\_

B. THE TOTAL NUMBER OF STUDENTS TO BE EMPLOYED:

- \_\_\_\_\_

C. THE HOURLY RATES OF PAY:

- Set at \$7.25 per hour by the Federal Government

D. THE AVERAGE NUMBER OF HOURS PER WEEK EACH STUDENT WILL BE ABLE TO WORK:

- Students may work up to a maximum of 15 hours per week within a community agency.
- Under no circumstances will a student be allowed to work more than 7.5 hours a day.

E. TOTAL LENGTH OF TIME THE PROJECT IS EXPECTED TO RUN:

- Student will be re-evaluated each term for eligibility
- Additional information: \_\_\_\_\_

F. THE TOTAL PERCENT OF STUDENT COMPENSATION THAT THE ORGANIZATION WILL PAY TO THE INSTITUTION:

- Zero

G. TOTAL PERCENT OF THE COST OF EMPLOYER'S PAYROLL CONTRIBUTION TO BE BORNE BY THE ORGANIZATION:

- Zero

H. OTHER PROTOCOL:

- 1) Under no circumstances will college work-study be allowed to schedule work during a scheduled class time. Students can not receive pay during a scheduled class. Schedules should be provided to the supervisor at hire.
  - a. Students and supervisor work out appropriate schedule
- 2) Under no circumstances is a paid lunch period provided. Students may take unpaid breaks.
- 3) Students are not to use phones or computers for personal use, while on the clock.

REPRESENTATIVES

DATE OF APPROVAL

Melanie Gallion

PRINTED NAME - INSTITUTION

SIGNATURE - INSTITUTION

PRINTED NAME - ORGANIZATION

SIGNATURE - ORGANIZATION

DATE

9-20-16

DATE





**USCB**  
EDUCATION DEPARTMENT  
CONSTRUCTIVIST EDUCATOR

**Department of Education**  
**Student Teachers and Practicum/Observation Placement Agreement**

The education of teachers in the state of South Carolina is the mutual responsibility and concern of the Beaufort, Jasper, Hampton and Colleton County school systems, the university preparing teachers, the State Board of Education, State Department of Education and members of the profession. The public schools of Beaufort, Jasper, Hampton and Colleton Counties and the University of South Carolina Beaufort agree to cooperate in the placement, supervision, and evaluation of students and interns.

WHEREAS, for fall semester 2016 and spring semester 2017, USCB's Department of Education desires to place teacher education students in the schools of the District as part of its field and clinical program; and

WHEREAS, the District desires to provide teacher education students with the opportunity to be placed in the schools of the District and desires to provide teachers in the District, who will serve as cooperating teachers, the opportunity to supervise students and interns.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the parties agree as follows:

**I. Responsibilities of the District:**

- A. To specify the procedures used for placing students and interns in their particular school district.
- B. To designate a district contact person to coordinate placements directly with the USCB's Coordinator of Field and Clinical Experiences.
- C. To provide classroom settings for students and interns, and supervision of students and interns by cooperating teachers, in accordance with USCB's Department of Education policies and course requirements.
- D. To terminate or refuse to accept any university student or intern when his/her presence is not in the best interest of the public school students.
- E. To provide cooperating teachers, to be approved by the Education faculty, who:
  1. have been approved by the principal and the District;
  2. are able to serve as a model for excellence in teaching;
  3. possess and exhibit high expectations for students;
  4. have strong skills in planning, oral/written communications; collaborative decision-making, judgment, and human relation skills;
  5. have strong instructional skills and current content knowledge;
  6. have strong skills in collaborating with other teachers and parents;
  7. have at least 3 successful years of experience, and at least one previous year in the current grade level;

8. have continuing contract status;
9. are committed to the time and effort needed to serve as a cooperating teacher to an intern;
10. are willing and able to observe and provide feedback to the student and/or intern with regard to developing lesson plans, improving instruction, managing the classroom and conducting him/herself professionally;
11. are willing to participate in a cooperating teacher meeting;
12. are available to the student and/or intern as necessary.

**II. Responsibilities of the Department:**

- A. To designate the Coordinator of Field and Clinical Experiences to coordinate placements, as well as all aspects of the field and clinical program, with a District contact person(s).
- B. To provide students and interns who have completed the required coursework in an approved teacher education program and who have been recommended for placement by Department faculty.
- C. To provide Department faculty to supervise students and interns and serve as a liaison between the University and the District with regard to the student's and intern's experience.
- D. To provide training/orientation opportunities for students and interns, University faculty, and cooperating teachers regarding the policies and procedures related to the internship program.

**III.** This agreement contains the entire understanding of the parties and any modifications thereto shall be in writing and fully executed by the parties.

**IV.** This agreement shall take effect upon execution and upon approval by the District, until such time as it may be terminated by mutual consent, or by 90-day notice of either party to this agreement.

IN WITNESS WHEREOF, the parties have entered into this agreement as indicated by the signatures below:

District: Beaufort County School Dist Department of Education, University of South Carolina Beaufort

By: [Signature]

By: Renee St. Tompkins

Title: Superintendent

Title: Interns Department Chair

Date: 8/10/2016

Date: 4/22/2016

[Signature]

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

Dr. Al Panu  
Chancellor  
University of South Carolina Beaufort