

**LENAPE REGIONAL HIGH SCHOOL DISTRICT
COMMUNITY SERVICE/INTERNSHIP/WORK GRADUATION CREDIT
Application for Community Service/Internship/Work (circle one)**

Student's Name _____ Grade _____
Street Address _____
City _____ State _____ Zip _____
Phone Number _____

Parent/Guardian Name _____
Phone Number _____

School Counselor's Name _____ Phone _____

Name and address of company/site where program will be performed:

Contact/Supervisor: _____
Phone Number: _____

Description of Program:

Will this Option Two program require a shortened school day?: _____ No _____ Yes
If yes, please explain: _____

How will the student get to and from the job site?: _____

Initial meeting held with site supervisor and student on: _____
Meeting held with school counselor and student on: _____

I agree to meet and complete all of the guidelines and requirements of the LRHSD Option Two course program and agree with the Parent/Guardian consent guidelines

Student _____ Date _____
Parent/Guardian _____
Site Supervisor _____

Principal/Designee _____

This agreement was: *Approved* _____ *Rejected* _____ *Reason* _____
Start Date _____ *Completion Date* _____

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AGREEMENT, WAIVER AND RELEASE

I hereby acknowledge that _____ (Student), has my permission to participate in the community service project as described in the Application for Community Service/Internship/Work. I hereby agree that _____ (Student) may participate in this off-campus volunteer program. I hereby agree and understand that (Student) is responsible for transportation to and from the community service location. I hereby further acknowledge, agree and understand that the Lenape Regional High School District Board of Education has no obligation to perform background checks on any external participants of the community service project. I further understand that participation in this activity is voluntary, and that there are risks involved in participating in this activity, and that Lenape Regional High School District Board of Education is not responsible for the safety of those students participating in the activity.

The safety, cost and transportation, to and from, any Option 2 program and any and all costs for programs, fees, books, supplies, support, tutoring, etc are the responsibility of the student's parent/guardian. By completing the Option 2 request the parent/guardian(s) agree to indemnify and hold harmless the Lenape Regional High School District, its agents or employees from any and all claims of any type, action, complaint, judgment, costs or personal injury, arising out of, or related to, the student's participation in the Option 2 program.

I hereby agree to release Lenape Regional High School District Board of Education, its employees and/or agents and anyone claiming through it, free and harmless from any and all lawsuits, demands or claims for any losses, damages, or injuries to person or property, including attorney's fees and costs, relating to or as a result of the student's participation in, or travel to and from the community service/internship/work activities. I further agree to indemnify and defend Lenape Regional High School District Board of Education for any lawsuits, demands, or claims by third parties arising out of such activity.

Name of Student

Name of Parent/Guardian

Signature of Parent/Guardian

Guidance Counselor's Signature_____

Date:_____

Guidance Counselor's Signature_____

Date:_____

Guidance Counselor's Signature_____

Date:_____

Guidance Counselor's Signature_____

Date:_____