

STUDENT FIELD PLACEMENT PROGRAM AGREEMENT

AGREEMENT BETWEEN:

HIGHER EDUCATION FACILITY (Referred To As "SCHOOL") Marian University	Department of Corrections
DIVISION; INSTITUTION, BUREAU/OFFICE /REGION; AND LOCATION OF STUDENT FIELD PLACEMENT DOC/DAI/TCI	

The student, _____, will be in the field placement for the period of _____
(Name of Student)

_____ . The Department's financial obligations will be _____
(Begin & End Date)

None

(None, Work Study & Amount, Stipend & Amount)

In consideration of the mutual benefits, the respective parties agree on the following:

DISCRIMINATION. There shall be no discrimination against students on the basis of race, color, creed, sex, age, national origin or state defined protected status.

LIABILITY. Each agency agrees that, as related to an interagency contract, any loss or expense (including costs and attorney fees) by reason of liability imposed by law, will be charged to the agency responsible for the officer, employee, or agent whose activity caused the loss or expense.

SCHOOL RESPONSIBILITIES. The School provides

- 1) the Department with verification that the student is enrolled during the field placement period and
- 2) any written guidelines for expectations and evaluation of the student.

The School has the right of final evaluation and grading of the student.

DEPARTMENT RESPONSIBILITIES. The Department provides

- 1) supervision of the student,
- 2) progress reports to the School as requested, and
- *3) reimbursement to the student for work-related expenses as authorized.

TERMINATION. Neither the School nor the Department will terminate a student unless in the opinion of either party, the student is not making satisfactory progress, has violated DOC policies (e.g.: fraternization, AODA confidentiality) or work rules, or has provided false information to DOC, and there is prior consultation between the School and the Department on the procedure to be followed.

SIGNATURE OF SCHOOL FIELD COORDINATOR

DATE SIGNED

SIGNATURE OF DEPARTMENT OF CORRECTIONS EMPLOYEE WHO WILL SUPERVISE STUDENT

DATE SIGNED

ADDITIONAL SUPERVISOR SIGNATURE (If Applicable)

DATE SIGNED

SIGNATURE OF STUDENT

DATE SIGNED

* Required by Supervisor's Manual Chapters 305 and 1001

DISTRIBUTION: Original – Field Instructor/Agent; Copy – School; Copy – Corrections Field Supervisor; Copy - Student