



Organization Responsibility and Assurance Document

Office of Student and Family Support and Engagement
Student Service Learning
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MCPS Form 560-51A
August 2016

Community organizations interested in being preapproved for student service learning (SSL) activities in Montgomery County Public Schools (MCPS) must agree to the following guidelines:

- Attend training on SSL procedures provided by MCPS every three years.
- Register with the [Montgomery County Volunteer Center](#) (MCVC) and provide updates when requested.
- Demonstrate coverage of general liability insurance and renew annually.
- Provide *secular activities (*Please read the complete clarification on *SSL Guidelines for Faith Organizations in the Community* document, found on the MCVC website)
- Advise students of the need that will be addressed, overall expectations, and safety information.
- Cover the SSL phases of preparation, action, and reflection.
- Supervise all activities in public places. SSL hours are not awarded for door-to-door neighborhood canvassing of any kind or telephone solicitation for financial donations.
- Maintain log and verify service on [MCPS Form 560-51, Student Service Learning Activity Verification](#) according to program timelines.
- Award one (1) SSL hour for every hour of service, not exceeding eight (8) hours within a 24-hour period.
- Comply with federal, state and local laws and Board of Education policy, that forbid discrimination on the basis of race, color, national origin, religion, ancestry, gender, age, marital status, socio-economic status, sexual orientation, gender identity, physical characteristics, or disability.
- Prohibit verbal abuse, threats, physical violence or sexual harassment directed against others.

As a representative of the organization listed below, my signature signifies that all individuals who supervise MCPS students participating in SSL opportunities with this organization will be required to agree to adhere to the MCPS SSL guidelines stated above.

Print Name _____ Title _____

Signature _____ Date ____/____/____

Organization _____

Address _____

Telephone ____ - ____ - ____ Fax ____ - ____ - ____

E-mail _____