



Official Use:

Dbase date entered:
Dbase entered by:
Profile date approved:
Approved by: _____

Community Partner Site Assessment Site Visit Checklist

Check all that apply: What types of learning opportunities does your organization offer?

Service Learning

UROC (Undergraduate Research)

Capstone (Senior Year Research)

CHHS (Health/Human Services field placements)

Internships (e.g. Business, Science)

MSW/MS/MA (Graduate program field placements)

OTHER: (describe below or attach)

PLACEMENT TYPE (Service Learning, UROC, Internship, etc.)	PLACEMENT CONTACT (NAME, TITLE)	PHONE	EMAIL

1. Community Based Organization (CBO): _____ Yr. Established: _____

Street Address: _____ State _____ Zip Code _____

Mailing Address: _____ State _____ Zip Code _____

General Phone #: (_____) _____ Fax#: (_____) _____

CBO Website: http:// _____

Has anyone from CBO attended a CSUMB orientation workshop? ☐ Yes ☐ No

If so, for which program (Internship, CHHS, SL, Research, CHHS or other): _____

Month/Year: _____ / _____ Attendee: _____

2. Provide a brief description of CBO purpose or mission (or attach brochure):

3. Days and hours of operation

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4. Organization Type

- School:** ☐ Government ☐ For Profit ☐ Non-Profit ☐ Faith-Based
☐ Elementary ☐ Middle ☐ High ☐ College/University
☐ Technical/Vocational ☐ Alternative Education ☐ Post Secondary/ Adult Education

5. Population(s) Served (only if applying to be a Service Learning Partner)

- | | | | |
|---|---|--|---------------------------------|
| <input type="checkbox"/> Disabled | <input type="checkbox"/> Gay, Lesbian, Bi-Sexual, Transgender | <input type="checkbox"/> Seniors | <input type="checkbox"/> Youth |
| <input type="checkbox"/> English as Second Language | <input type="checkbox"/> Homeless | <input type="checkbox"/> Special Education | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Families | <input type="checkbox"/> Low Income | <input type="checkbox"/> Veterans | |
| <input type="checkbox"/> Farm workers | <input type="checkbox"/> Men | <input type="checkbox"/> Women | |

6. Issues Addressed

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Education – Literacy | <input type="checkbox"/> Health- Sub. Abuse | <input type="checkbox"/> Public Safety |
| <input type="checkbox"/> Aging & Adult Services | <input type="checkbox"/> Education - Mathematic | <input type="checkbox"/> HIV/ AIDS | <input type="checkbox"/> Self – Sufficiency |
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education - Middle School | <input type="checkbox"/> Homelessness | <input type="checkbox"/> Sexual Orientation |
| <input type="checkbox"/> Animal Welfare | <input type="checkbox"/> Edu- Physical Education | <input type="checkbox"/> Housing | <input type="checkbox"/> Social Services - Adults |
| <input type="checkbox"/> Arts | <input type="checkbox"/> Environmental Sustainability | <input type="checkbox"/> Hunger/Food Insecurity | <input type="checkbox"/> Social Services Children & Youth |
| <input type="checkbox"/> Arts/Museums | <input type="checkbox"/> Family Services | <input type="checkbox"/> Immigration & Naturalization | <input type="checkbox"/> Suicide Prevention |
| <input type="checkbox"/> Before/ After School | <input type="checkbox"/> Food Security | <input type="checkbox"/> Juvenile Justice | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Behavioral Health | <input type="checkbox"/> Food/Gardening | <input type="checkbox"/> Labor/ Employment Development | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Child Abuse | <input type="checkbox"/> Foster Care/ Adoptions | <input type="checkbox"/> Law & Legal Services | <input type="checkbox"/> Urban Planning & Development |
| <input type="checkbox"/> Child Welfare | <input type="checkbox"/> Gerontology | <input type="checkbox"/> Legal Assistance / Social Justice | <input type="checkbox"/> Veterans |
| <input type="checkbox"/> Community Gardening | <input type="checkbox"/> Global | <input type="checkbox"/> Media / TV/ Radio | <input type="checkbox"/> Voter Registration |
| <input type="checkbox"/> Comm./Economic Development | <input type="checkbox"/> Global Issues | <input type="checkbox"/> Medical & Hospital | <input type="checkbox"/> Women's Issues |
| <input type="checkbox"/> Conflict Resolution/Peace & Justice | <input type="checkbox"/> Health/Human Services | <input type="checkbox"/> Museum | <input type="checkbox"/> Women's Rights |
| <input type="checkbox"/> Crime Prevention/ Support | <input type="checkbox"/> Health – Aging & Hospice | <input type="checkbox"/> Music/ Performance Art | <input type="checkbox"/> Youth - At Risk |
| <input type="checkbox"/> Day Care | <input type="checkbox"/> Health - Chronic Disease | <input type="checkbox"/> Parenting/ Education | <input type="checkbox"/> Youth Career Exploration |
| <input type="checkbox"/> Disabilities | <input type="checkbox"/> Health – Comm. Wellness | <input type="checkbox"/> Poverty | <input type="checkbox"/> Youth – Rec. Prog. |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Health – Mental Wellness | <input type="checkbox"/> Probation / Parole | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Health – Nutrition | <input type="checkbox"/> Public Administration | |
| <input type="checkbox"/> Education – Early Childhood | <input type="checkbox"/> Health – Physical Fitness | | |
| <input type="checkbox"/> Education – High School | <input type="checkbox"/> Health – Policies & Practices | | |
| <input type="checkbox"/> Education K-6 | <input type="checkbox"/> Health – Public Health | | |

7. Demographics (only if applying to be a Service Learning Partner)

Total number served annually: _____

_____ % African American _____ % Asian American _____ % Bicultural/Multicultural _____ % Caucasian
_____ % Latina/o _____ % Native American _____ % Other (*please describe*) _____

8. Logistics

- a. What is the maximum number of CSUMB students site can accept/supervise per semester? _____
- b. Is there a public transportation route available? ☐ Yes ☐ No
- c. What do CSUMB students need to do to check in at the site? _____
- d. How will students track their hours at the site? ☐ CSUMB Activity Time Log ☐ Other: _____

9. Special Requirements & Preferences

- | | | | |
|-----------------------------|-----------------------------------|--|--|
| California Driver's License | <input type="checkbox"/> Required | First Aid Certification | <input type="checkbox"/> Required |
| Computer Literacy | <input type="checkbox"/> Required | Fingerprinting | <input type="checkbox"/> Required |
| CPR Certification | <input type="checkbox"/> Required | | |
| Background Check | <input type="checkbox"/> Required | If Required , is Background Check paid for by organization? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| TB test | <input type="checkbox"/> Required | If Required , is TB test paid for by organization? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

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10. Language Needs/ Preferences

	Required	Preferred		Required	Preferred		Required	Preferred
American Sign Language	<input type="checkbox"/>	<input type="checkbox"/>	Japanese	<input type="checkbox"/>	<input type="checkbox"/>	Vietnamese	<input type="checkbox"/>	<input type="checkbox"/>
Cambodian	<input type="checkbox"/>	<input type="checkbox"/>	Korean	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	<input type="checkbox"/>	Spanish	<input type="checkbox"/>	<input type="checkbox"/>			
German	<input type="checkbox"/>	<input type="checkbox"/>	Tagalog	<input type="checkbox"/>	<input type="checkbox"/>			

11. Ongoing Opportunities:

a. Course-based Internships:

b. Service Learning:

c. Undergraduate Research:

d. Capstone Projects:

e. Special/Other:

12. Hours/days CSUMB students can perform each activity (i.e. internships, service learning, research, etc.)

Type of Placement (internship, service learning, etc)	Monday am/pm	Tuesday am/pm	Wednesday am/pm	Thursday am/pm	Friday am/pm	Saturday am/pm	Sunday am/pm

13. Training and Orientation

Is there any specific training that the CBO will provide?

☐ Yes ☐ No

Will training be provided to CSUMB students in the following areas?

Community Overview

☐ Yes ☐ No

Confidentiality

☐ Yes ☐ No

Emergencies

☐ Yes ☐ No

Mandatory Reporting on Abuse/Neglect

☐ Yes ☐ No

Safety Policies/Procedures

☐ Yes ☐ No

Sexual Harassment

☐ Yes ☐ No

If No to any of these, has CSUMB staff has discussed its inclusion with CBO?

☐ Yes ☐ No

Briefly describe any additional special training CBO will provide:

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14. Site Tour

- a. Has CBO given CSUMB staff and/or faculty a tour of facilities where students will be working? ☐ Yes ☐ No
Describe site(s): _____
- b. Is site wheelchair accessible? ☐ Yes ☐ No
- c. Has CSUMB staff and/or faculty member been introduced to CBO staff who will supervise students? ☐ Yes ☐ No
- d. Will CSUMB students be participating in field trips? ☐ Yes ☐ No
- e. Will CBO ask CSUMB students to sign a waiver? ☐ Yes ☐ No
- f. Will CBO send CSUMB students to a sites other than at the primary address? ☐ Yes ☐ No

IF YES, list addresses and descriptions of additional areas CSUMB students will serve:

Address:	Description:

15. Risk Identification

- a. Does your organization have a formal volunteer process in place? ☐ Yes ☐ No
- b. Are CSUMB students eligible to sign-up as volunteers? ☐ Yes ☐ No
- c. Will CSUMB students ever work unsupervised with clients? ☐ Yes ☐ No
- d. Will the CBO maintain CSUMB student's emergency contact info? ☐ Yes ☐ No
- e. Does CBO have general liability insurance policy? If Yes, please supply a copy. ☐ Yes ☐ No
- f. Will the CBO cover worker's compensation for CSUMB students? ☐ Yes ☐ No
- g. Are there specific health and/or safety risks associated with the student's specific work assignment? ☐ Yes ☐ No

If Yes, Please Explain: _____

- h. Is there any history of violence, environmental hazards or other health and safety risks on the site? ☐ Yes ☐ No

If Yes, Please Explain: _____

- i. Describe any specific recommended precautions for students working at your site:

16. Additional Information

- a. Will CSUMB student travel for CBO business in company car? ☐ Yes ☐ No
- b. Will CSUMB student travel for CBO business in student's own car? ☐ Yes ☐ No
- Note: Service learners are NOT to use personal vehicles to provide services for the CBO.**
- c. Are CSUMB students allowed to take photographs? ☐ Yes ☐ No
- d. Will CSUMB students be asked to bring any materials for orientation or during service hours? ☐ Yes ☐ No

If Yes, please describe materials required: _____

- e. **Appropriate Attire:** Please note any requirements, dress codes and/or policies regarding appropriate attire
(examples: cover tattoos; wear close toed shoes; no red or blue clothing):

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17. CBO-Student Supervision Contacts: Please list staff responsible for direct supervision of CSUMB students, by placement type (eg. service learning, UROC research, CHHS, etc.). Attach additional sheets if necessary.

Name & Title	Phone & Ext	Email	Placement Type	Semester / Date

18. PROOF (copy) or EXPLANATION OF INSURANCE COVERAGE ATTACHED? **YES** **NO**

ATTENTION- REQUIRED: Proof and/or explanation of insurance coverage must be attached to this form OR submitted with your signed University Agency Agreement for Placement of Students (UAAPS) in order to place CSUMB students with your agency.

CBO Supervisor – Primary Contact & Signature

I have met and/or discussed with this CSUMB representative to discuss the items above. Information in this Site Visit Checklist is accurate.

 Name (Print) Signature Date
 Title: _____

CSUMB representative interviewer:

I have made sure that all of the questions have been answered thoroughly and accurately.

 Name (Print) Signature Date
 Title: _____

R-1. Renewal date: _____

R-2. Renewal site check: Please note all changes to site since last visit: (attach additional forms if necessary)

R- 3. Renewal – CBO Contact Name & Signature:

Print Signature Date

R-4. Renewal - CSUMB Representative Name & Signature:

Print Signature Date
