**Tucker Center CROSS Fellowship**

**CSO SUPERVISOR’S STATEMENT OF AGREEMENT**

The student indicated below is applying for a Tucker Center CROSS Fellowship at your organization. Submission of information for this agreement signifies to the Tucker Center program and to the Tucker Center student fellow that your Community Service Organization (CSO) has agreed to provide the specific, volunteer work assignment described below, and has appointed a specific supervisor. Please indicate if your organization can contribute to the intern’s award - financial or in-kind (for example, housing or meals). This Statement of Agreement records the details of funding. All selected Tucker CROSS Fellows are covered by medical insurance. This agreement is not a legal contract, and is not forwarded to any public agencies. Students WILL NOT receive funding if this form is not completed in full.

(Organization Name) agrees to take (Fellow’s Name) into the organization and to provide 40 hours of meaningful service work during at least 8 weeks of the Summer term, and to supervise this work to the degree that at the end of the internship a brief evaluation can be offered by the supervisor.

The offer of this internship is contingent upon award of a Tucker Center Fellowship (optional).

**List community service tasks of internship:** (Fellows should devote at least 60% of their time to direct community service, defined as work in which volunteers engage personally with those being served, providing labor that fills an identified community need.)

**List activities on which remaining time may be spent:** (Activities such as research, advocacy, shadowing, public policy, office support, and event planning may be part of an internship, but are not considered direct service. This work must not constitute more than 40% of the proposed internship.)

*The Tucker Center* provides interns with a stipend of up to $4,000, based on need, to help defray living costs. Host organizations are asked to pay, when possible, a portion of the stipend for the intern. Please indicate the level of stipend you can meet:

a)  **Yes**, we can fund the amount of $ as a stipend.

b)  **No**, we will not be able to fund any portion of the student's stipend.

1. We can support the intern with the following living accommodations and/or

other assistance

**Date:**

**Supervisor's Name:**

**Supervisor’s Title:** \_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor's Signature:**

*(\*electronic signature accepted)*

**Address:**

**Phone:**  **Fax:**

**Is this a non-profit organization?** Yes No

**Does this organization serve an under-resourced community?** Yes No

**Is this organization non-partisan?** Yes No

**Length of project:** weeks **Hours weekly:** (40 hours minimum)

**Starting Date:** **Ending Date:**

**Return by deadline date of** November 30, 2022 **to:**

Melinda Cooper

Tucker Center, Dartmouth College

6154 South Fairbanks Hall

Hanover, NH 03755-3568

Phone: 603-646-3780

Email: [Tucker.Center@Dartmouth.edu](mailto:Tucker.Center@Dartmouth.edu)

After return of this signed and completed Statement of Agreement from the Community Service Organization, the Tucker Center Intern, by his/her signature below, signifies that the terms of this Agreement are understood and accepted:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Tucker CROSS Fellowship applicant name) (Date)**