

Fresno State Learning Site Risk Assessment Form

Directions:

This form can be completed either by a representative of Fresno State or the Learning Site.

Information collected to complete this form should be obtained from a knowledgeable representative of the Learning Site who is familiar with the organization's safety policies & procedures and the potential learning activities that Fresno State students will be engaged in as part of their experiential learning activities (experiential learning includes service learning, internships, practicums and field experiences.)

For assistance, please contact Fresno State Career Development Center @ 559.278.2381 or Fresno State Risk Management @ 559.278.7422.

* Required

1. Learning Site Name *

Please list full Company name - Include dba's (doing business as) and abbreviations as needed

2. Internship Position Title *

3. Learning Site/Organization's website *

Type "N/A" if not applicable

4. Your Name *

Contact information if follow up needed

5. Are you a representative of: *

Mark only one oval.

- Fresno State *Skip to question 6.*
- Learning Site *Skip to question 7.*

Fresno State Department

6. Which department? *

Learning Site Representative

7. Are you the Point of Contact for the Learning Site? *

Mark only one oval.

- Yes *Skip to question 9.*
- No *Skip to question 8.*

Skip to question 8.

Point of Contact Information

8. List the information for the Point of Contact for the Learning Site: *

Please include Name, Title, email address & phone number

*Skip to question 9.***PoC / LSS****9. Will the Point of Contact also serve as the Learning Site Supervisor for the students? ****Mark only one oval.*

- Yes *Skip to question 11.*
- No *Skip to question 10.*

Learning Site Supervisor Information**10. List the information for the Learning Site Supervisor: ***

Please include Name, Title, email address & phone number

Site Assessment**11. Your Contact Phone Number ***

How can we best reach you?

12. Your Email Address *

Will help speed up the process if additional information is needed

13. Learning Site Address *

Street Address, City, State, Zip Code

14. What are the terms of the experiential learning activity (internship)? *Select all that apply
Check all that apply.

- Paid
- Unpaid (Students must enroll in an academic internship course)
- Other: _____

15. What education level of student are you looking to recruit? *

Check all that apply
Check all that apply.

- Undergraduate
 Graduate
 Other

Supervision**16. Will the student(s) be supervised on a weekly basis at the learning worksite? ***

Mark only one oval.

- Yes
 No

17. In the absence of the site supervisor, who will oversee the students? *

Please include Names, Titles, email addresses & phone numbers

Client Interaction**18. Will students be working unsupervised with or have unsupervised access to vulnerable populations, such as those with physical or intellectual disabilities, mental illness, the elderly or minors? ***

Mark only one oval.

- Yes
 No

19. If yes, please describe the populations to be served by the intern.

20. Will students be working with individuals who have a known criminal background or history of violent behavior? *

Mark only one oval.

- Yes
 No

Learning Site Location**21. Please list the address(es) of the additional learning site location(s). ***

Street Address, City, State, Zip Code

22. Work Hours: What are the working hours of the learning site? *

23. Which of the following best describes where students will complete their experience? *

Check all that apply
Check all that apply.

- At a single site
- At one of several sites
- At a single site, but doing related assignments at the events or off site
- At a personal residence
- Virtual
- International location
- Other: _____

24. Would the location be described as a high-crime area, or are there unmitigated concerns about the parking or work areas being secure or adequately illuminated? *

Mark only one oval.

- Yes
- No
- N/A

Skip to question 25.

HR Policies**25. Does the learning site have established HR or other policies that will be shared with students regarding work site discrimination, sexual harassment, cell phone usage, internet usage or professional behavior expectations? ***

Mark only one oval.

- Yes
- No

26. Will the internship involve driving on behalf of the learning site? *

Note: Does not include driving to and from assigned learning site(s).

Mark only one oval.

- Yes
- No

27. If the intern will be driving on behalf of the location, please describe.

28. Is a confidentiality agreement required at the learning site? *

Mark only one oval.

- Yes
- No

Safety

29. Are there concerns with the site's physical location: such as physical, environmental, or inherent hazards that are not addressed adequately by training and security measures? *

Mark only one oval.

Yes

No

30. If there are concerns, please describe.

31. Have there been any incidents of criminal activity at the organization within the last year that could potentially impact the safety and security of student interns? *

Mark only one oval.

Yes

No

32. If there have been these types of incidents, please describe.

33. Does the internship require working with any hazardous materials, heavy equipment or heavy machinery, or power tools? *

Mark only one oval.

Yes

No

34. If yes, please describe the materials, equipment, machinery or tools.

35. Where applicable, does the work site provide safety training for all equipment used and other safety procedures at the worksite? *

Mark only one oval.

Yes

No

36. Is Personal Protective Equipment (PPE) required? *

Mark only one oval.

Yes

No Skip to question 40.

PPE

37. Please list all PPE required/used *

Personal Protective Equipment

38. Will students receive training on PPE usage at the learning site? *

Personal Protective Equipment

Mark only one oval. Yes No**39. Will the PPE be provided at the learning site? ****Mark only one oval.* Yes No, but students are expected to bring their own PPE*Skip to question 40.***Emergency Plan****40. Does the learning site have an emergency plan/procedure in place to share with students in case of emergency? ****Mark only one oval.* Yes No**41. Are there any concerns as to the internship site's emergency plan or regarding non-working fire-rated doors or blockages to the exits and hallways?***Mark only one oval.* Yes No**42. If there are concerns, please describe.**

43. Please list anything else that has not been covered that might impact the safety and well-being of the students.

44. Additional comments/feedback

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