

**AN AGREEMENT RELATING TO FIELD PLACEMENT FACILITIES  
FOR THE DEPARTMENT OF HUMAN DEVELOPMENT AT  
WASHINGTON STATE UNIVERSITY**

THIS AGREEMENT is between WASHINGTON STATE UNIVERSITY, hereinafter referred to as the "University", acting through the College of Agriculture, Human and Natural Resource Sciences and the Department of Human Development, hereinafter referred to as the "HD Department", and Clark County Youth House, hereinafter referred to as the "Cooperating Institution".

Recitals

1. There presently exists a shortage of persons educated and trained to serve as professionals in multi-disciplinary human service roles, both in urban and non-urban settings and in the nation as a whole, when the demand for such multi-disciplinary functions is increasing.
2. The HD Department within the College of Agriculture, Human and Natural Resource Sciences uniquely offers instruction and programs in a wide spectrum of interrelated studies in human development sciences and services which provide a multi-perspective approach to such services.
3. There exists, however, a need for experiences which integrate academic knowledge with professional application.
4. There exists, therefore, a need for facilities suitable to properly train and prepare students for multi-disciplinary human service roles to meet the public demand and need for such services.
5. The program undertaken by the University and its HD Department represents an effort to meet the needs described above.
6. The University has the authority to contract for the use of certain facilities suitable for conducting an instruction program in HD.
7. The Cooperating Institution has the necessary facilities needed by the HD Department and desires to contribute to the success of the program by making certain facilities and services available for instruction in accordance with this agreement.

The parties agree as follows:

- I. Undergraduate Instruction: The University and the Cooperating Institution enter into this agreement whereby undergraduate instruction will be offered at the Cooperating Institution under the auspices of the HD Department.
- II. University's Undertakings: The University shall undertake the following:

1. Assume responsibility for all instruction and administration of the program in HD.
  2. Establish standards for the selection and employment of faculty employed primarily to teach students.
  3. Appoint faculty for student instruction and pay their salaries, and administrative and support costs.
  4. Provide information regarding dates for instruction, according to the university calendar, and forecasts of students to be assigned to the Cooperating Institution.
  5. Assign for professional training in the Cooperating Institution only those students who have met the entrance requirements of the undergraduate program in HD.
- III. Cooperating Institution's Undertakings: The Cooperating Institution shall, consistent with its primary obligation to care for its patients/clients, and consistent with its available space and facilities, undertake the following:
1. Provide experience opportunities up to the limit of professional facilities.
  2. Accept for basic professional instruction in professions related to HD those students who are enrolled in the HD program at the University.
  3. Provide educational benefits to the students at the same time the students provide service benefits to the Cooperating Institution.
  4. Cooperate with faculty members assigned to the teaching unit in the selection of student learning experiences.
  5. Provide supplies and equipment for students assigned to the Cooperating Institution service units that are also provided staff in carrying out their duties.
  6. Training Site (Cooperating Institution) will accept placement of only those students who are insured against liability for actions or inactions occurring in the internship setting. Students participating in an internship program will be covered either by an experiential student policy offered through Washington State University or acquired by the student through another source. The limits on the liability policy shall be, at minimum, \$1,000,000 per occurrence. Certificates of such coverage purchased by the student will be provided to Training Site upon request. Should proof of insurance not meet with Training Site's approval and satisfaction, Training Site can refuse to accept any student for placement.
- IV. Joint Undertakings: The Cooperating Institution and the University, together with appropriate representatives of the College, shall jointly undertake the following:

1. Each party to this agreement will be responsible for the negligent acts or omissions of its own employees, officers, or agents in the performance of this Agreement. Neither party will be considered the agent of the other nor will either party assume any responsibility to the other party for the consequences of any act or omission of any person, firm, or corporation not a party to this Agreement.
  2. Plan for student placement in the Cooperating Institution.
  3. Plan for periodic review of the agreement.
- V. Costs and Expectations: It is specifically agreed that neither party shall be responsible for costs or expenditures incurred by the other in the conduct of this program, other than those expenses defined in any separate agreements that may be made between the parties cooperating in this program.
- VI. Student's Status: The students assigned to the Cooperating Institution shall be and remain students of the University and shall in no sense be considered employees of the Cooperating Institution unless otherwise agreed in writing between the Cooperating Institution and the student. Students and faculty shall adhere to the Cooperating Institution's rules, regulations, procedures, and policies during their periods of professional instruction. The Cooperating Institution shall have the right to terminate the use of any of its facilities by any student or faculty member where flagrant or repeated violations of the Cooperating Institution's rules, regulations, procedures, and policies occur. Such action will not normally be taken until the grievance against any faculty member or student has been discussed with the University and the appropriate representative of the HD Department. The Cooperating Institution reserves the right to take immediate action where necessary to maintain operation of the institution free from disruption.
- VII. Notices: All notices or official communication which may be required under this agreement shall be given as follows:
1. Notice to University: Department of Human Development  
Washington State University  
PO Box 644852  
Pullman, WA 99164-4852
  2. Notice to Cooperating Institution:  
  
Attention: Kris Henriksen, Program Coordinator  
Agency Name: Clark County Youth House  
Agency Address: 1012 Esther Street  
Vancouver, WA 98660
- VIII. Non-Discrimination: Each party certifies that it will not discriminate in the performance of this Agreement on the basis of race, color, national origin, gender, sexual orientation

(to include gender identity), religion, veteran or military status, or the presence of any sensory, mental or physical disability or the use of a trained guide dog or service animal by a person with a disability, in compliance with (a) Presidential Executive Order 11246, as amended, including the Equal Opportunity Clause contained therein; (b) Section 503 of the Rehabilitation Act of 1973, as amended, and the Vietnam Era Veterans Readjustment Act of 1974, as amended, and the Affirmative Action Clauses contained therein; (c) the Americans with Disabilities Act of 1990, as amended; and (d) Washington state civil rights and nondiscrimination laws. The parties further agree they will not maintain facilities which are segregated on the basis of race, color, religion or national origin in compliance with Presidential Executive Order 11246, as amended, and will comply with the Americans with Disabilities Act of 1990, as amended, regarding programs, services, activities and employment practices.

- IX. Amendments: This agreement may be amended by mutual agreement in writing, executed by the officials executing this agreement or their successors, and appended herewith.
- X. Effective Date: This agreement shall become effective upon signature by all parties, and shall continue for four (4) years, with options for review and renewal thereafter. Either party may terminate the agreement on July 1 of any succeeding year, provided notice in writing is given to the other party at least six (6) months in advance of the proposed termination date.

WASHINGTON STATE UNIVERSITY

COOPERATING INSTITUTION

Recommended By:

Suzanne Rolencite

By: Robert M. Stevens  
(Signature)

Date: 7-11-17

Name: Robert M. Stevens  
(Type or Print)

Approved By:

[Signature]

Title: Deputy County Manager

Chair, Department of Human Development

Date: 7/11/17

Date: 6/29/17

APPROVED AS TO FORM ONLY:

DocuSigned by:  
Amanda Migchelbrink 6/29/2017  
F8B2CB11528542F

Amanda Migchelbrink  
Deputy Prosecuting Attorney

### Certificate Of Completion

Envelope Id: A6DE5EA456744FF580F187865154AF1D Status: Sent  
 Subject: Please DocuSign This Internship Agreement with Washington State University (2017-YH-01)  
 Source Envelope:  
 Document Pages: 4 Signatures: 1 Envelope Originator:  
 Supplemental Document Pages: 0 Initials: 0 Lynn Mueller  
 Certificate Pages: 5  
 AutoNav: Enabled Payments: 0 1300 Franklin St  
 EnvelopeId Stamping: Enabled Vancouver, WA 98660  
 Time Zone: (UTC-08:00) Pacific Time (US & lynn.mueller@clark.wa.gov  
 Canada) IP Address: 64.4.182.165

### Record Tracking

Status: Original Holder: Lynn Mueller Location: DocuSign  
 6/28/2017 10:04:41 AM lynn.mueller@clark.wa.gov

### Signer Events

Amanda Migchelbrink  
 amanda.migchelbrink@clark.wa.gov  
 Security Level: Email, Account Authentication (None)

### Signature

DocuSigned by:  
  
 FBB2CB11528542F

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 Signed: 6/29/2017 11:55:39 AM

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**Electronic Record and Signature Disclosure:**  
 Accepted: 6/29/2017 11:53:36 AM  
 ID: 3324ec4a-9e10-4706-a735-698842a587a7

Tina Redline  
 tina.redline@clark.wa.gov  
 Office Supervisor  
 Clark County, WA  
 Security Level: Email, Account Authentication (None)

Sent: 6/29/2017 11:55:40 AM  
 Viewed: 6/29/2017 12:37:42 PM

**Electronic Record and Signature Disclosure:**  
 Not Offered via DocuSign

Lynn Mueller  
 lynn.mueller@clark.wa.gov  
 Security Level: Email, Account Authentication (None)

**Electronic Record and Signature Disclosure:**  
 Not Offered via DocuSign

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Notary Events	Signature	Timestamp

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Envelope Sent

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**Payment Events****Status****Timestamps****Electronic Record and Signature Disclosure**

## **CONSUMER DISCLOSURE**

From time to time, Clark County, WA (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign, Inc. (DocuSign) electronic signing system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to these terms and conditions, please confirm your agreement by clicking the "I agree"™ button at the bottom of this document.

### **Getting paper copies**

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after signing session and, if you elect to create a DocuSign signer account, you may access them for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

### **Withdrawing your consent**

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. To indicate to us that you are changing your mind, you must withdraw your consent using the DocuSign "Withdraw Consent"™ form on the signing page of a DocuSign envelope instead of signing it. This will indicate to us that you have withdrawn your consent to receive required notices and disclosures electronically from us and you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures

electronically from us.

**How to contact Clark County, WA:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [loann.vuu@clark.wa.gov](mailto:loann.vuu@clark.wa.gov)

**To advise Clark County, WA of your new e-mail address**

To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at [loann.vuu@clark.wa.gov](mailto:loann.vuu@clark.wa.gov) and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address..

In addition, you must notify DocuSign, Inc. to arrange for your new email address to be reflected in your DocuSign account by following the process for changing e-mail in the DocuSign system.

**To request paper copies from Clark County, WA**

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an e-mail to [loann.vuu@clark.wa.gov](mailto:loann.vuu@clark.wa.gov) and in the body of such request you must state your e-mail address, full name, US Postal address, and telephone number. We will bill you for any fees at that time, if any.

**To withdraw your consent with Clark County, WA**

To inform us that you no longer want to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your DocuSign session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an e-mail to [loann.vuu@clark.wa.gov](mailto:loann.vuu@clark.wa.gov) and in the body of such request you must state your e-mail, full name, US Postal Address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

**Required hardware and software**

Operating Systems:	Windows® 2000, Windows® XP, Windows Vista®; Mac OS® X
Browsers:	Final release versions of Internet Explorer® 6.0 or above (Windows only); Mozilla Firefox 2.0 or above (Windows and Mac); Safari®, 3.0 or above (Mac only)
PDF Reader:	Acrobat® or similar software may be required to view and print PDF files
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	Allow per session cookies

\*\* These minimum requirements are subject to change. If these requirements change, you will be asked to re-accept the disclosure. Pre-release (e.g. beta) versions of operating systems and browsers are not supported.

**Acknowledging your access and consent to receive materials electronically**

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the "I agree"™ button below.

By checking the "I agree"™ box, I confirm that:

- I can access and read this Electronic CONSENT TO ELECTRONIC RECEIPT OF ELECTRONIC CONSUMER DISCLOSURES document; and
- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and
- Until or unless I notify Clark County, WA as described above, I consent to receive from exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by Clark County, WA during the course of my relationship with you.