



School Enrollment Request Form

Please print and return signed form to pspvista.ut@gmail.com

Your name

Name of your PSP site

Name of University or College

City and state where school is located

Start date of your classes

Estimated graduation date

Full-Time or Part-Time student?

Estimated hours per week on classes & schoolwork

Full-Time

Part-Time



Please indicate that you agree to the following terms by selecting "Yes" or "No" under the corresponding statement.

Is a commitment to PSP and your site your paramount focus?

Will your schooling interfere with PSP or site service hours?

Yes

Yes

No

No

Will PSP or site needs interfere with school requirements?

Do you understand that you will be required to attend all mandatory PSP training events and service projects?

Yes

Yes

No

No

Have you discussed your school enrollment with your PSP Supervisors?

Have you discussed your school enrollment with your Site Supervisor?

Yes

Yes

No

No



How will you ensure that your primary commitment will be to PSP and your site while you are enrolled as a student?

By signing your name below, you agree to prioritize your service as a Public School Partnership VISTA member at your community site and to assure all parties involved that your service and schooling will not conflict with one another.

Date

PSP AND SITE SUPERVISOR SECTION

Site Supervisor Decision

Approve Deny

Site Supervisor Signature & Date

PSP Supervisor Decision

Approve Deny

PSP Supervisor Signature & Date

After you have received approval and a signature from your Site Supervisor, please email this form to pspvista.ut@gmail.com.