



# Fresno State Learning Site Risk Assessment

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 Trisha Studt at [tstudt@csufresno.edu](mailto:tstudt@csufresno.edu) or Fresno State Risk Management @ 559.278.7422.

### Learning Site Name

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

### Learning Site Address

Please include Street Address, City, State and Zip  
2044 E Nees Ave, Fresno, CA, 93720

Learning Site/Organizations Website everyneighborhood.org

Your Name Andrew Feil Title Executive Director

Email andrew@everyneighborhood.org Phone (including area code) 559-430-6598

Are you the point of contact for the organization?  Yes  No

If “no”, what is the name, title, email and phone number of the point of contact for the organization?

I am the contact

Will you be supervising the student(s) at the learning site?  Yes  No

If “no”, what is the name, title, email and phone number of the person from the organization who will be supervising the student(s). Several - Jenessa Hefler - jenessa@everyneighborhood.org - 559.363.9111, Erika Castanon - erika@everyneighborhood.org - 559-283-5135

## Internship Supervision

Will the student(s) be supervised less than 50% of the time or will the supervisor be responsible for overseeing more than 8 people?  Yes  No

### Client Interaction

**Will students be working unsupervised with or have unsupervised access to any of the following vulnerable populations: (Please check all that apply)**

Minors     Elderly     Physical Disability     Intellectual Disability     Mental Illness     None of the above are applicable

**Will students be working with individuals who have a known criminal background or history of violent behavior?**  Yes     No

### Learning Site Information

**Which of the following best describes where students will complete their experience? (Check all the apply)**

At a Single Site     At One of Several Sites     At a Single Site, but Doing Related Assignments Off Site  
 At a Home-Based Business Site     Virtual (not in-person)     International Location

**Please list the address(es) of the additional learning site location(s), if different than the address listed at the top of this form. (Mark N/A, if not applicable.)**

still to be determined. we are waiting on our housing and after school programs for exact locations.

**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?**  Yes     No

### HR Policies

**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?**  Yes     No

**Will the student assignment involve driving on behalf of the learning site?** Note: Does not include driving to and from assigned learning site(s).  Yes     No

**If the student will be driving on behalf of the location, please describe.** no

### SAFETY

**Is your organization following Federal, State, and Local (including but not limited to: School District, Health Department) guidelines, requirements and regulations related to COVID-19 to ensure the safety of your staff and program participants?**  Yes     No

**Does your organization provide appropriate training regarding COVID-19 as it relates to the student's educational activities?**  Yes     No

**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?**  Yes     No

**If there are concerns, please describe.**

n/a

**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?**  Yes  No

**If there have been these types of incidents, please describe. (Mark N/A, if not applicable)**

n/a

**Does the experiential learning activity require working with any hazardous materials, heavy equipment or heavy machinery, or power tools?**  Yes  No

**If yes, please describe the materials, equipment, heavy machinery or power tools. (Mark N/A, if not applicable)**

n/a

**Where applicable, does the work site provide safety training for all equipment used and other safety procedures at the worksite?**  Yes  No

### Personal Protective Equipment

**Is Personal Protective Equipment (PPE) required in accordance with Cal/OSHA, CDC recommendations.**  Yes  No

**If yes, please list all PPE required/used. (Mark N/A, if not applicable)**

Masks, gloves (when food is distributed), cleaning supplies (wipes and/or spray).

**Will students receive training on PPE usage at the learning site?**  Yes  No

**Will the PPE be provided at the learning site?**  Yes  No, but students are expected to bring their own PPE.

### Emergency Plan

**Does the learning site have an emergency plan/procedure in place to share with students in case of emergency?**  Yes  No

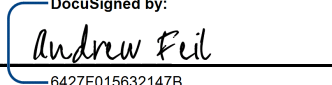
**Are there any concerns as to the site's emergency plan or regarding non-working fire-rated doors or blockages to the exits and hallways?**  Yes  No

If there are concerns, please describe. (Mark N/A, if not applicable)

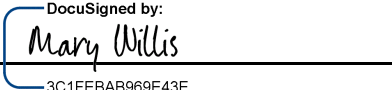
n/a

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

Nope. Look forward to working with Fresno State students!

Printed Name Andrew Feil Signature   
Date Completed 8/17/2020

Reviewed by Fresno State University Internship Coordinator

Signature  Date Reviewed 8/17/2020

Comments:

The PPE required is focused on food safety and COVID-19.

Review by Fresno State EHS/Risk Manager or Designee

Signature  Date Reviewed 8/17/2020

Comments:

Approved under the authority of the University Risk Manager, Lisa Kao.

Approved:

Not Approved: