

PERSONAL CARE ATTENDANT – STUDENT AGREEMENT

Having been approved by the Center for Academic Success and Accessibility Services (CASAS) for accommodation(s) allowing me to have a personal care attendant (PCA) at Southern, I understand, acknowledge and agree that:

1. **Engaging a PCA.** I am solely responsible for finding, hiring, and paying for any PCA I use at SCSU. I am advised to do my own due diligence in selecting a PCA and contract with a reputable and licensed agency or a reputable and licensed independent PCA.
2. **Supervision of PCAs.** I am solely responsible for training and supervising the PCAs and ensuring the PCAs fulfill their duties and responsibilities. I am advised to develop a clear written job description and list of specific tasks the PCAs will perform for me. SCSU does not assume responsibility for any PCA or their failure to fulfill their contracted duties and responsibilities with me.
3. **Release.** I hereby release SCSU, its officers and agents from and against any and all claims, demands, causes of action, orders or judgments relating to or arising from my use of PCAs at SCSU. I understand I am fully responsible for any and all damages, losses and injuries caused by my PCAs and hereby agree to indemnify and hold SCSU harmless from the same, unless such injury, death, damage, or loss is related to the gross negligence or intentional or willful misconduct of SCSU, its employees, officers, directors, agents, representatives, successors or assigns.
4. **Health & Safety.** I will ensure that before starting work at SCSU, each PCA I hire complies with all SCSU health and safety requirements. I understand that no PCA may start work on campus until a satisfactory background investigation has been completed or approved by SCSU's Office of Human Resources.
5. **Conduct.** I am responsible for ensuring all PCAs I use comply with all relevant SCSU policies and procedures, including:
 - a. the **SCSU/Board of Regent's Student Code of Conduct** (available at <https://inside.southernct.edu/handbook/student-code-of-conduct>)
 - b. the **SCSU Guide to Living on Campus** (if applicable, available at <https://inside.southernct.edu/residence-life>)
 - c. the terms of the **PCA Provider Agreement**, and
 - d. the **PCA Housing Access Agreement** (if applicable).

I understand SCSU reserves the right to remove my PCA from campus (including housing, classrooms, laboratories, other academic buildings), and SCSU-sponsored activities off campus at any time if SCSU determines the PCA has violated or acted in a manner inconsistent with any of these policies, procedures or agreements, or has falsified any information submitted to SCSU. Such removal may occur regardless of any contractual relationship I may have with the PCA. SCSU will provide me with a written explanation of and basis for such removal within seven (7) calendar days of the removal.

6. **Academic & Classroom Expectations.**
 - a. I understand the PCAs may not assist me in my coursework, including helping with assignments, taking notes (unless specifically permitted in my CASAS-approved accommodations), providing answers, taking

tests, etc. Such unauthorized assistance may be deemed a violation of the **SCSU Policy on Academic Misconduct** (available [here](#)) and the BOR/SCSU Student Code of Conduct.

- b. The PCA must remain outside the classroom (which includes laboratories and other learning spaces) while class is in session unless otherwise permitted under my CASAS-approved accommodations.
- c. If my accommodations specifically permit the PCA inside the classroom, I will ensure the PCA does not participate during lectures and class discussions or otherwise disturb or distract from the learning environment.

- 7. **PCA Guidelines, Agreements, Etc.** I have read SCSU's **PCA Procedures and Guidelines** as well as the **PCA Provider Agreement**, and (if applicable) the **PCA Housing Access Agreement** and agree to all provisions therein for each of my PCAs, and agree to all provisions in this Agreement.
- 8. **Notification to Campus Partners.** Occasionally CASAS may need to notify Residence Life, SCSU Police, Facilities, faculty, and other campus partners of the presence of a PCA on campus. By signing this Agreement I am consenting to such notification.
- 9. **PCA Information; New PCAs.** My current PCAs are listed below. Within 24 hours, I will inform CASAS and, if residing on campus, the Office of Residence Life, of any changes to this list. I also will ensure any new PCA undergoes a background check conducted or approved by the SCSU Office of Human Resources and signs all relevant documentation required by SCSU. I understand that any PCA I employ cannot begin work on campus until cleared by SCSU.

PCA 1 Name (printed): _____	Cell No.: _____
Agency Name: _____	
Agency Tel. No. _____	Check if not affiliated with an agency <input type="checkbox"/>
PCA 2 Name (printed): _____	Cell No.: _____
Agency Name: _____	
Agency Tel. No. _____	Check if not affiliated with an agency <input type="checkbox"/>
PCA 3 Name (printed): _____	Cell No.: _____
Agency Name: _____	
Agency Tel. No. _____	Check if not affiliated with an agency <input type="checkbox"/>
PCA 4 Name (printed): _____	Cell No.: _____
Agency Name: _____	
Agency Tel. No. _____	Check if not affiliated with an agency <input type="checkbox"/>

Attach additional sheets as necessary.

Student Name (print): _____

SCSU ID: _____

Student Signature

Date

CASAS Representative Signature

Date