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**AFFILIATION AGREEMENT**

*between*

**ORANGE COUNTY, FLORIDA**

*and*

**THE FLORIDA STATE UNIVERSITY BOARD OF TRUSTEES**

*related to*

**EXPERIENTIAL LEARNING PLACEMENT PROGRAM**

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**THIS AFFILIATION AGREEMENT** ("Agreement") is entered into by and between **ORANGE COUNTY, FLORIDA**, a charter county and political subdivision of the State of Florida located at 201 South Rosalind Avenue, Orlando, Florida 32801 (the "County") for the benefit of certain County departments and divisions, and **THE FLORIDA STATE UNIVERSITY BOARD OF TRUSTEES**, a public body corporate of the State of Florida, acting for and on behalf of Florida State University (the "University"), for the benefit of certain University colleges, including the FSU College of Medicine, the FSU College of Nursing, and the FSU College of Social Work. The County and University may be referred to herein individually as "party" or collectively as "parties."

**WHEREAS**, the University provides accredited programs within various fields of study, a list of which is attached to this Agreement as **Exhibit "A"**, and desires that students enrolled within these programs are afforded the opportunity to obtain practical experience by securing experiential learning placements (also known as "internships" or "externships") with third parties;

**WHEREAS**, the County has the appropriate placement departments and divisions, as well as the requisite supervisory personnel to provide the University's students with experiential learning placements that are relevant to the University's programs of study, a list of which is attached to this Agreement as **Exhibit "B"**; and

**WHEREAS**, the County and the University desire to establish and implement an Experiential Learning Placement Program (the "Program") in order to facilitate the placement of the University's students at the County's participating placement departments and divisions in order to ensure that those placements are done in a manner that is beneficial to both the University's programs of study and the County's operations.

**NOW AND THEREFORE**, in consideration of the mutual promises herein, the University and the County agree as follows:

**Section 1. Recitals.** The above recitals are true and correct, and are hereby incorporated as a material part of this Agreement.

**Section 2. Documents.**

A. The documents that are hereby incorporated by reference or attachment, and therefore form this Agreement, are:

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1. This Agreement;
2. **Exhibit A:** Participating University Departments;
3. **Exhibit B:** Participating County Placement Departments and Divisions; and
4. **Exhibit C:** Experiential Learning Placement Program Internship Application.

**Section 3. Definition of “Intern”.**

A. Under this Agreement, and the Program described in this Agreement, an “Intern” is an individual – whether paid, unpaid, or obtaining academic credit – that for the duration of their participation in this Program is:

1. Enrolled as an active student at the University; and
2. Is engaging in an experiential learning placement that is beneficial to both that student and to the County facility at which that placement is located.

B. For the purposes of this Agreement, and the Program described herein, an Intern is **not** a student, or any University faculty, staff, associate, or volunteer that is pursuing research or observational objectives.

**Section 4. Responsibilities of the County.**

A. The County shall:

1. Designate a person within each of the County’s participating departments and divisions to serve as liaison (“County Liaison”) and provide to the University, in writing, the name, contact information, and professional credentials of the County Liaison prior to the beginning of any Intern’s experiential learning placement;
2. Ensure that all Interns meet the County’s hiring standards and provide Interns with an appropriate orientation regarding the County’s policies and procedures;
3. Provide Interns with the opportunity to obtain “real world” experience under appropriate supervision;
4. Notify the University in writing, of any Intern whose work or conduct with the County’s clients, patients, students, or personnel is not, in the sole opinion of the County, in compliance with acceptable procedures or standards of performance, or could otherwise disrupt patient care or the County’s operations;
5. Retain ultimate responsibility for the work-place and its operations;
6. Endeavor to comply with all applicable requirements of any accreditation authority over the County or University and certify such compliance to the University upon request; and
7. Permit the authority responsible for accreditation of the University’s curriculum to inspect the participating County department or division facilities, services, and

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other related items during the regular hours of operation of those facilities, services, and other related items.

**Section 5. Responsibilities of University.**

A. The University shall:

1. Designate a member of the University faculty ("University Liaison") within each participating University Department to coordinate the educational experience of participating students with the relevant County Liaison. The University shall provide the County the name and applicable contact information of the University Liaison prior to the beginning of any Intern's experiential learning placement;
2. Assign only those students to serve as Interns who have satisfactorily completed the portions of the University's curricula which are a prerequisite for participation in the Program;
3. Require all University staff and faculty associated with the Program to:
  - a. Comply with the confidentiality requirements of HIPAA and this Agreement; and
  - b. Report any and all suspected breaches of those requirements in the manner required by this Agreement.
4. Inform Interns participating in the Program that those Interns shall:
  - a. Complete the County's Experiential Learning Placement Program Internship Application ("Internship Application"), the current version of which is attached to this Agreement as **Exhibit "C"**, and which may be revised and redistributed to the University by the County without need to amend this Agreement;
  - b. Wear appropriate attire or the assigned uniform while on duty;
  - c. Wear, at all times, a pictured name tag identifying his or her status with the University;
  - d. Comply with the County's policies and procedures including, but not limited to, the County's policies on confidentiality and disclosure of information, as well as the requirements related to and responsibilities under HIPAA, in keeping with the requirements of the "HIPAA Privacy and Security Rules" Section of this Agreement;
  - e. Comply with all applicable federal, State, and local laws, ordinances, rules and regulations; and
  - f. Obtain **prior** written approval of both parties to this Agreement before publishing any material in any journals, books, periodicals or other similar

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outlets related to the learning experiential provided under the terms of this Agreement.

**Section 6. Health Insurance and Emergency Care.**

A. **Health Insurance.** The University shall require all Interns to carry health insurance and shall provide verification of that health insurance to the County upon request. Failure by the County to verify an Intern's health insurance does not in any way relieve the University of its responsibility under this provision.

B. **Emergency Care.** Should, while an Intern is participating in the Program or in the Program facility, emergency care becomes necessary for that Intern due to accidental injury, illness, or exposure to an infectious or environmental hazard, the County will arrange for immediate emergency care for the Intern, but will not be responsible for any associated costs including, but not limited to, any costs involving follow up care or hospitalization.

**Section 7. Hiring and Screening Procedures.**

A. No later than thirty (30) days prior to the beginning of the upcoming semester, the University Liaison for a participating University department shall provide the completed Intern Applications to the County Liaison of the relevant County departments or divisions with which its Interns wish to obtain an experiential learning placement. If an Intern's departmental supervision is not listed in **Exhibit "A"**, the University shall also provide the County, in writing, the name and contact information of that intern's departmental supervisor.

B. **All Interns.** The University acknowledges that all Interns selected to participate in the Program by the County shall meet the County's hiring standards, regardless of whether they are compensated. The County reserves the right to deny participation to any Intern, including any who do not complete the County's Student Intern Employment Agreement or who refuse to provide all required documentation (such as photo identification or driver's license, social security card, official transcripts, etc.) prior to that Intern's placement with the County.

C. **Interns with Vulnerable Population Contact.** All Interns present on the County's premises and who, by nature of their experiential learning placement, will be engaged in the provision of services to "vulnerable persons" as defined in Section 435.02, Florida Statutes ("Vulnerable Persons"), may be required to complete a background screening in compliance with Section 435.04 (Level 2 screening standards), Florida Statutes, at the County's expense.

1. All individuals in positions (whether paid or unpaid) requiring Level 2 screenings shall be subject to – and shall complete – such screenings prior to access, supervision, or direct care of any Vulnerable Person under the Agreement. Screenings shall include an initial Level 2 background screening with additional Level 2 background screening performed thereafter at five (5) year intervals.
2. Level 2 background screenings shall consist of an employment history check which shall include fingerprinting. Fingerprinting shall be used to process the following screenings:

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- a. Statewide Criminal and Juvenile Records Check through the Florida Department of Law Enforcement;
  - b. Federal Criminal Records Check through the FBI; and
  - c. May include Local Criminal Records Check through Local Law Enforcement.
3. The County shall identify the Interns who will need Level 2 background screening and inform the University.
  4. The University shall be responsible for informing all Interns that they may be subjected to such screenings as a condition of their participation in the Program.

**Section 8. No Guarantee of Placement.** Both the County and the University acknowledge that neither party guarantees placement, or the maintained placement, of any applicant to, or Intern within, the Program.

**Section 9. Removal from Premises.** The County may, in its sole and absolute discretion, remove any University faculty, employee, student or Intern from the County's premises or Program at any time. In such event the removal is of an Intern, said Intern's participation in all assignments with the respective placement department or division shall immediately cease, and they shall only be permitted to resume such assignments upon mutual agreement by the County and the University.

**Section 10. HIPAA Privacy and Security Rules.**

A. The County shall provide all Interns with compliance training in the Health Insurance Portability and Accountability Act of 1996, as codified at 42 U.S.C. § 1320d through d-8 ("HIPAA") and the requirements of any regulations promulgated thereunder including, without limitation, the federal privacy regulations as contained in 45 CFR Part 164 (the "Federal Security Regulations"), prior to any Intern's participation in the Program.

B. By execution of this Agreement, the University hereby certifies that no Intern shall be expected to share or disclose to the University – including the Intern's supervisory faculty or any other University employee – any information or data that:

1. Is protected health or personally identifiable information; or
2. Has not been "de-identified" in compliance with the HIPAA Safe Harbor Standard, 45 CFR §165.514.

C. Within forty-eight (48) hours of discovery, or as soon as practicable thereafter, the University shall report to the County's HIPAA Privacy Officer any use or disclosure in violation of this Agreement, HIPAA, the Federal Privacy Regulations, or the Federal Security Regulations of the patient's Protected Health Information ("PHI"). The County's HIPAA Privacy Officer shall be contacted at:

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**Orange County HIPAA Privacy Officer**  
2002 A. East Michigan Street  
Orlando, FL 32806  
[Privacy.Officer@ocfl.net](mailto:Privacy.Officer@ocfl.net)

**Section 11. Term of Agreement.**

A. **Term.** This Agreement shall remain in effect from the date both parties execute the agreement through September 30, 2029, unless terminated by one of the parties pursuant to the Termination provisions of this Agreement.

B. **Permitted Extension of Term.** The parties hereby agree that the terms of this Agreement shall be extended to permit Interns enrolled in the Program at the time of termination to complete their participation in the Program with the County, so long as they remain compliant with the requirements set forth in this Agreement. For the purposes of this section, "termination" covers both a lack of timely renewal as well as termination with or without cause as provided for in this Agreement.

**Section 12. Termination of Agreement.** Either party may cancel this Agreement at any time, either with or without cause. The terminating party shall give the other party thirty (30) days written notice of its intention to terminate this Agreement, with or without cause. If such notice is given, this Agreement shall terminate at the end of the thirty (30) days' notice.

**Section 13. Notices.** All notices under this Agreement shall be in writing and delivered by hand delivery, express courier, or United States Postal Service certified mail with return receipt requested, and shall be effective upon receipt of the same. Notices shall be delivered to the applicable University Liaison and County Liaison, as identified in **Exhibits "A" and "B"**, and to each of the parties at the following addresses or at such other addresses as specified by written notice in compliance with the terms of this paragraph.

**To the County:** Orange County, Florida  
Attn: Director, Human Resources  
P.O. Box 1393  
Orlando, FL 32802-1393

**Copy to:** Orange County Administrator  
P.O. Box 1393  
Orlando, FL 32802-1393

**To the University:** Provide notice to the Intern's University Liaison using the relevant contact information provided in **Exhibit "A"**.

**Section 14. Independent Contractor.** The relationship of the parties under this Agreement shall be an independent contractor relationship, and not an agency, employment, joint venture or partnership relationship. Neither party shall have the power to bind the other party of contract in the name of the other party. All persons employed by a party in connection with this Agreement shall be considered employees of that party and shall in no way, either directly or indirectly, be considered employees or agents of the other party. The University's students shall participate in the Program for the sole purpose of fulfilling specific requirements

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for clinical experiences as part of a degree requirement and, therefore, the University's students are not to be considered employees or agents of either the University or the County for any purpose, including Workers' Compensation, employee benefits programs, or other form of compensation.

**Section 15. Indemnification.** Each party to this Agreement will be responsible for claims, losses, liabilities, damages, and expenses arising out of each party's own negligent performance or non-performance by each party's own agents and employees, acting within the scope of their agency or employment, and their respective tasks, duties, and obligations contained within this Agreement, and neither party will be responsible for claims, losses, liabilities, damages, and expenses arising out of the other party's negligent performance or non-performance by the other party's agents and employees, acting within the scope of their agency or employment, and their respective tasks, duties, and obligations contained within this Agreement. This recognition by the parties hereto is intended to be consistent with the State of Florida's waiver of sovereign immunity pursuant to Section 768.28, Florida Statutes, and as interpreted by the Florida Supreme Court in *Florida Dept. of Natural Resources v. Garcia*, 753 So. 2d 72, 77 - 78 (Fla. 2000), and it does not alter said waiver nor extend the liability of either party beyond the limits established in Section 768.28, Florida Statutes.

**Section 16. Insurance.** The University shall procure insurance as required within this Agreement. Any failure on behalf of the County to verify that the University has complied with the applicable insurance requirements of this Agreement does not, in any way, relieve the University of its obligations to ensure that such applicable insurance coverage is in place.

A. The University is a political subdivision of the State of Florida and participates in the State Risk Management Trust Fund. The self-insured fund provides liability coverage in accordance with Section 768.28, Florida Statutes. Proof of such coverage shall be provided by the University upon request.

B. The University warrants that the Florida State University College of Medicine Self-Insurance Program, authorized and established pursuant to Section 1004.24, Florida Statutes, and Board of Governors of the State of Florida Regulation 10.001, when applicable, provides general liability protection and professional patient care liability protection for the students of Florida State University while engaged in pre-approved course of study and training programs (when not subject to the immunity as described in Section 768.28, Florida Statutes), for the rendering of, or failure to render, Professional Health Care Services, and provides the following student coverage limits: Patient General Liability: \$1,000,000 per occurrence, with an annual \$3,000,000 aggregate, and Professional Liability: \$ 1,000,000 per occurrence, with an annual \$3,000,000 aggregate. The University shall submit certificates of protection to the County evidencing such coverage upon request. In the event the University's students in the Program will not have patient contact, the students shall not be required to procure and maintain any such policy or policies of liability coverage as described above.

**Section 17. Records Management.** The University shall retain copies of all records associated with this Agreement for a period of five (5) years from the date of termination. In the event of litigation, claim, or audit findings, the record retention period shall be five (5) years from the time of the resolution of the litigation, claim, or audit findings. Should the University dissolve or otherwise terminate this Agreement without the capability of retaining the records, as required by this Agreement, all such records shall be transferred to the County. Notwithstanding the

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foregoing, this provision shall not require the retention of Student Class Work Records, as defined in the State of Florida General Records Schedule GS5, beyond the time period prescribed in that retention schedule.

**Section 18. Public Records.**

A. All books, documents, records, and accounts related to this Agreement shall be subject to the applicable provisions of the Florida Public Records Act, Chapter 119, Florida Statutes. All records or documents created by, or provided to the County, the University, or Intern under the terms of this Agreement are public records and the County and the University agree to comply with any request for such public records or documents made in accordance with Section 119.07, Florida Statutes. If the record requested is in the possession of an Intern, the University agrees to assist the County in obtaining the record, if necessary.

B. The University shall make available copies of all records associated with this Agreement for examination or inspection, subject to applicable public records exemptions. The University shall comply with all requests for public records associated with this Agreement in accordance with Florida's Public Records Law and other applicable State law requirements. The County shall make available copies of all records associated with this Agreement for examination or inspection. The County shall comply with all requests for public records associated with this Agreement in accordance with Florida's Public Records Law and other applicable State law requirements.

C. If the University has questions regarding the application of Chapter 119, Florida Statutes, to the University's duty to provide Public Records relating to this Agreement, contact the County's Public Records Liaison at Address: 450 East South Street, Suite 360, Phone Number: 407-836-5400, and Email: [PublicRecordRequest@ocfl.net](mailto:PublicRecordRequest@ocfl.net). If the County has questions regarding the application of Chapter 119, Florida Statutes, to the County's duty to provide Public Records relating to this Agreement, contact the University's Office of General Counsel at [generalcounsel@fsu.edu](mailto:generalcounsel@fsu.edu), (850) 644-4440.

D. Both parties are subject to the requirements of Chapter 119, Florida Statutes. As such, each party will comply with its obligations under Chapter 119, Florida Statutes, and each party will cooperate with the other in the handling of public records created under this Agreement. Notwithstanding anything set forth in any provision of this Agreement to the contrary, neither party will be required to modify records kept in the normal course of business by that party in order to provide copies of those records to the other party, and neither party will be required to destroy any records in its custody in violation of Chapter 119, Florida Statutes.

**Section 19. General Provisions.**

A. **Assignments and Successors.** The parties deem the Services to be rendered pursuant to this Agreement to be personal in nature. Each party binds itself and its partners, successors, executors, administrators, and assigns to the other party of this Agreement and to the partners, successors, executors, administrators, and assigns of such other party, in respect to all covenants of this Agreement. Neither party shall assign, sublet, convey, or transfer its interest in this Agreement without the written consent of the other, which consent shall be in the sole determination of the party with the right to consent.



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B. **Attorneys' Fees and Costs.** Unless otherwise expressly stated in this Agreement, the parties shall each bear their own costs, expert's fees, attorneys' fees, and other fees incurred in connection with this Agreement and any action or proceeding arising out of or relating to this Agreement (an "**Action**").

C. **Conflicts.** The Agency shall comply with all applicable local, state, and federal laws, regulations, executive orders, and the policies, procedures, and directives of the County. Should there be conflict between the various applicable laws and this Agreement, the most restrictive shall govern.

D. **Construction and Representations.** Each party acknowledges that it has had the opportunity to be represented by counsel of such party's choice with respect to this Agreement. In view of the foregoing, and notwithstanding any otherwise applicable principles of construction or interpretation, this Agreement shall be deemed to have been drafted jointly by the parties and in the event of any ambiguity, shall not be construed or interpreted against the drafting party. Neither party has relied upon any representations or statements made by the other party to this Agreement which are not specifically set forth in this Agreement.

E. **Counterparts and Electronic Transmission of Signatures.** This Agreement may be executed in counterparts, both of which shall be deemed an original and which taken together shall constitute one agreement. Any counterpart may be delivered by any party by electronic transmission of the full Agreement as executed by that party to the other party as mutually agreed upon by the parties, and delivery shall be effective and complete upon completion of such transmission.

F. **Force Majeure.** Neither party will be held responsible for any delay or failure in performance of any part of this Agreement to the extent such delay or failure is caused by explosion, war, embargo, government requirement, civil or military authority, pandemic and epidemics, act of God, or other similar causes beyond the party's control.

G. **Governing Law.** This Agreement shall be considered as having been entered into in the State of Florida, and shall be construed and interpreted in accordance with the laws of that state.

H. **Headings.** The headings or captions of sections or subsections used in this Agreement are for convenience of reference only and are not intended to define or limit their contents, nor are they to affect the construction of or to be taken into consideration in interpreting this Agreement.

I. **Jury Waiver.** Each party hereby irrevocably waives, to the fullest extent permitted by applicable law, any right that party does or might have to a trial by jury related to any Action.

J. **No Third-Party Beneficiaries.** Nothing in this Agreement, express or implied, is intended to, or may be construed to, confer upon any person other than the parties, their respective successors and permitted assigns, any legal or equitable right, benefit or remedy of any nature under or by reason of this Agreement.

K. **Nondiscrimination.** The Agency shall, at no time during the provision of services funded through this Agreement, discriminate based on any characteristics protected by law.

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Both parties shall comply with any and all applicable federal, state, and local anti-discrimination laws, rules, and regulations.

L. **Nonexclusive Agreement.** This Agreement is nonexclusive to both parties providing both the County and the University the right to enter into other agreements with different parties regarding the same or similar subject matter.

M. **Remedies.** No remedy conferred upon any party in this Agreement is intended to be exclusive of any other remedy, and each and every such remedy shall be cumulative and shall be in addition to every other remedy given hereunder or now or hereafter existing at law or in equity or by statute or otherwise. No single or partial exercise by any party of any rights, power, or remedy hereunder shall preclude any other or further exercise thereof.

N. **Severability.** The provisions of this Agreement are declared by the parties to be severable. However, the material provisions of this Agreement are dependent upon one another, and such interdependence is a material inducement for the parties to enter into this Agreement. Therefore, should any material term, provision, covenant, or condition of this Agreement be held invalid or unenforceable by a court of competent jurisdiction, the party protected or benefited by such term, provision, covenant, or condition may demand that the parties negotiate such reasonable alternate contract language or provisions as may be necessary either to restore the protected or benefited party to its previous position or otherwise mitigate the loss of protection or benefit resulting from holding.

O. **Signatory.** Each signatory below represents and warrants that they have full power and are duly authorized by their respective party to enter into and perform under this Agreement. Such signatory also represents that they have fully reviewed and understand the above conditions and intend to fully abide by the conditions and terms of this Agreement as stated.

P. **Sovereign Immunity.** Nothing contained in this Agreement shall constitute, or be construed in any way as, a waiver of either party's sovereign immunity or the protections and provisions of Section 768.28, Florida Statutes.

Q. **Survivorship.** Those provisions which by their nature are intended to survive the expiration, cancellation, or termination of this Agreement, including, by way of example only, the indemnification and public records provisions, shall survive the expiration, cancellation, or termination of this Agreement.

R. **Use of County and Agency Logos.** Both parties are prohibited from use of any and all of the other party's emblems, logos, or identifiers without written permission from that party. For more information about the use of the County's logos, refer to Section 2-3, Orange County Code.

S. **Venue.** Each of the parties hereby irrevocably submits to the jurisdiction of any federal or state court of competent jurisdiction sitting in Orange County, Florida, regarding any Action, and further agrees that any such Action shall be heard and determined in such Florida federal or state court. Each party hereby irrevocably waives, to the fullest extent it may effectively do so, the defense of an inconvenient forum to the maintenance of any Action in Orange County, Florida.

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T. **Waiver.** No delay or failure on the part of any party to this Agreement to exercise any right or remedy accruing to such party upon the occurrence of an event of violation shall affect any such right or remedy, be held to be an abandonment thereof, or preclude such party from the exercise thereof at any time during the continuance of any event of violation. No waiver of a single event of violation shall be deemed to be a waiver of any subsequent event of violation.

U. **Written Modification.** No modification of this Agreement shall be binding upon any party to this Agreement unless it is reduced to writing and is signed by a duly authorized representative of each party to this Agreement. Notwithstanding the foregoing sentence, through its execution of this Agreement, the Orange County Board of County Commissioners hereby delegates the authority to execute amendments to Exhibits "A", "B", and "C" of this Agreement to the Director of the County's Human Resources Division as needed for the efficient and effective administration of this Agreement.

V. **Cooperation.** Both parties agree that, in the event that either becomes aware of a claim asserted by any person arising out of this Agreement or any activity carried out under this Agreement, the parties shall cooperate in defending the claim, securing evidence, including making available to FSUSIP all medical records necessary for investigation no later than 10 business days after such request is made, and obtaining the cooperation of witnesses, to the extent allowed by law; provided that the parties determine that their interests are not adverse with respect to such claim.

**Section 20. Entire Agreement.** This Agreement and any documents incorporated or attached to this Agreement sets forth and constitutes the entire agreement and understanding of the parties with respect to the subject about which this Agreement was drafted. This Agreement supersedes any and all prior agreements, negotiations, correspondence, undertakings, promises, covenants, arrangements, communications, representations, and warranties, whether oral or written, of any party to this Agreement.

**[ SIGNATURES ON FOLLOWING PAGE ]**

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**IN WITNESS WHEREOF**, the parties have executed this Agreement on the dates set forth below.

**ORANGE COUNTY, FLORIDA**

By: Orange County Board of County Commissioners

By: \_\_\_\_\_  
Jerry L. Demings  
Orange County Mayor

ATTEST: Phil Diamond, CPA, County Comptroller  
As Clerk of the Board of County Commissioners

By: \_\_\_\_\_  
Deputy Clerk

Date: \_\_\_\_\_

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**THE FLORIDA STATE UNIVERSITY BOARD OF  
TRUSTEES**

Signed by:  
By: James Clark  
B18589D3322F414...

Name: James Clark

Title: Provost & Executive Vice President for Academic Affairs

Date: 11/20/2025 | 2:33 PM EST



**Experiential Learning Placement Program  
Participating University Departments**

**EXHIBIT A**

**University Departments**

**Florida State University College of Social Work**

University Liaison:

296 Champions Way  
University Center C 2570  
Tallahassee, Florida 32306  
Attn: Office of Field Education

**Florida State University College of Medicine**

University Liaison: Kelly Gallavan, Director of Clinical and Community Affairs

1115 West Call Street  
Tallahassee, Florida 32306  
kgallavan@fsu.edu

**Florida State University College of Nursing**

University Liaison: Katie Lambert, Clinical Coordinator

98 Varsity Way  
P.O. Box 3064310  
Tallahassee, Florida 32306  
kel22g@fsu.edu



**Experiential Learning Placement Program  
Participating County Placement Departments and Divisions**

**EXHIBIT B**

**Youth and Family Services**

County Liaison: Barbara Williams, Manager

1758 E. Michigan Street

Orlando, FL 32806

Phone (407) 836--8168



## Experiential Learning Placement Program Internship Application

## EXHIBIT C

Last Name	First Name	Middle	Date
Address		City	State      Zip Code
Home Phone	Mobile Phone	Email	
Emergency Contact Name		Relation	Phone
Current Occupation/Employer		Supervisor	Phone
University or University	Department/Program	Contact Person	Phone

**Degree Currently Seeking:**   ☐ Bachelors      ☐ Masters      ☐ Doctoral      ☐ Other \_\_\_\_\_      **Cumulative GPA:** \_\_\_\_\_

**Certifications/Licenses:** \_\_\_\_\_      **Computer/Language Skills:** \_\_\_\_\_

**Desired Internship Focus:**   ☐ Counseling/Psychology      ☐ Community Relations      ☐ Criminal Justice/Law      ☐ Medical/Nursing  
☐ Social Work      ☐ Public Administration      ☐ Finance/Accounting      ☐ Other: \_\_\_\_\_

**Desired County Placement\*:**   ☐ Citizens Comm. for Children      ☐ Community Action      ☐ Corrections Health      ☐ Fire Rescue Headquarters  
☐ Head Start Program      ☐ Health Services Admin.      ☐ Medical Clinic      ☐ Medical Examiner  
☐ Regional History Center      ☐ Youth and Family Services      ☐ Other: \_\_\_\_\_

**Desired Semester:** ☐ Fall ☐ Spr. ☐ Sum.      **Desired Start Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_      **Desired End Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_      **Hours Per Week:** \_\_\_\_\_

### INTERNSHIP AVAILABILITY

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<b>Mornings:</b>							
<b>Afternoons:</b>							
<b>Evenings:</b>							

**Supervisory Requirements** (if contract is required, please attach): \_\_\_\_\_

By submitting this application, I understand that: (1) I may be required to undergo a background check meets the requirements of Section 435.04, Florida Statutes; (2) the specific County departments/divisions to which I am applying for placement may require additional information from applicants; (3) if I am selected for a placement, I will be required to participate in training/orientation sessions; and (4) submitting an application does not guarantee that I will be selected for an internship placement with the County.

Intern Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

**\*PLEASE BE SURE THAT THIS APPLICATION IS SUBMITTED TO THE CORRECT COUNTY LIAISON.**

### – FOR INTERNAL OFFICE USE ONLY –

**Start Date:** \_\_\_\_\_  
**End Date:** \_\_\_\_\_  
**Work Location:** \_\_\_\_\_  
**Program:** \_\_\_\_\_  
**Supervisor:** \_\_\_\_\_

**Background Checks: (Local)** \_\_\_\_\_  
**(Prelim)** \_\_\_\_\_  
**(Final)** \_\_\_\_\_