



THE UNIVERSITY of
MISSISSIPPI

Experiential Learning Program Form

This form should be completed by departments proposing a new or renewed program of an extra-curricular experiential learning for UM students or non-UM participants, including high school students.

Requests for programs that may involve paying program participants will be reviewed monthly by a **Student Experiential Program Review Board** to determine whether the proposed program should be classified as **employment**, or whether it meets the threshold to be considered an **experiential learning program**. For approved experiential learning programs, the Board will provide guidance on whether participation payments should be made as stipends via the student payroll system managed by HR; dispersed as student aid through the Office of Financial Aid; paid as a contractual service managed by the Office of Procurement Services; or some combination of the above.

Requests for programs to support participating minors (high school students between from rising 9th grad to current 12th graders) in experiential programs during the academic year or summer sessions should also submit this form. These forms will be reviewed by the **Rebel Research Scholars Advisory Board** to determine whether the program meets the safety and supervision requirements of the Rebel Research Scholars programs.

Please complete the sections indicated by the answers to the three questions below, secure required signatures, and submit this form and any supporting documentation to studentprograms@olemiss.edu.

Is this a renewal request for a previously approved program? **Yes** **No**

If **Yes**:

Attach a copy of your program report from last year;
Please fill out *at least* form sections **A, B, and H**; and
Keep reading the questions below....

If **No**:

Please fill out *at least* form sections **A, C, D, and H**; and
Keep reading the questions below....

Will or might you provide any payments to program participants? **Yes** **No**

If **Yes**:

Please fill out *at least* form sections **A, E, and H**; and
Keep reading the questions below....

Will or might high school students participate in this program? **Yes** **No**

If **Yes**:

Please fill out *at least* form sections **A, F, G, and H**.

Section A: Header Information

Section A should be filled out by ALL REQUESTORS.

Program Name: _____

Director's Name: _____ E-mail: _____ Phone: _____

Other Contact Name (if any): _____ E-mail: _____ Phone: _____

Requesting Department: _____

Provide the period of time this program will be offered: Start Date: _____ End Date: _____

Approximately how many students do you expect to participate in this year's program?

Number of high school students: _____

Number of UM undergraduates: _____

Number of UM graduate students: _____

Number of other/external participants: _____

Total number of participants: _____

Will participants attend the program on consecutive dates or intermittently? (check box)

- Consecutive** **Intermittent**

If Intermittent, provide details about participation dates/times: _____

Provide the program website, if any: _____

Section B: Renewal Information

Section B should only be filled out if this is a RENEWAL request.

What was the last year this program was offered? _____

What was the approved Program Number that year? _____

Please attach a copy of your program report from that year to this application.

Have any changes been made to the program since last approved? **Yes** **No**

If yes, please indicate what has changed (select all that apply) and provide details of how the program is different.

- purpose of the program
- activities in which the participants will be involved
- recruitment and selection process
- whether host department receives an immediate advantage from participant activities
- benefits that participants receive from the experience
- expectations placed on participants
- direct correlation between the participant's field of study and the program experience
- other

Section C: Program Information

Section C should be filled out for all NEW program requests.

Describe the purpose of the program:

Describe activities in which the participants will be involved:

Describe the process by which participants are recruited and selected:

Section D: Program Criteria

Section D should be filled out for all NEW program requests.

Does the host department receive an immediate advantage from the activities of the participants? **Yes** **No**

If yes, describe:

Provide a brief description of benefits that participants will receive from this experience:

What expectations are placed on the participants?

Is this experience directly related to the participants' field of study? **Yes** **No**
If yes, please describe:

Do all participants receive the same experience? **Yes** **No**

If no, describe how they vary:

Please share any additional information pertinent to this request:

Section E: Financial Information

Section E should be filled out for any programs involving PAYMENTS to PARTICIPANTS.

Do you anticipate providing stipends or other payments to any or all of the participants?

Yes **No**

If yes to student payments:

How much will each participant receive?

Will ALL participants receive payments? **Yes** **No**

If No, why not? How will decisions be made about who gets paid?

-

Will ALL participants be paid the same amount? **Yes** **No**

If No, why not? How will decisions be made about who receives how much?

What is the purpose of stipends/payments? (*e.g., to defray travel or lodging expenses; for meals during the experience; as incentives to participate; some combination, or other purpose?*)

Will any participants need to be paid IN ADVANCE of the experience?

NOTE: Advanced payments of participant **stipends** are generally discouraged but may be considered in extraordinary (rare) circumstances. Advances for actual **travel experiences** are the generally preferred way to pay advances.

Yes **No.** **If yes**, explain how much will need to be paid by when, and why.

Will any funds be paid to OTHER PARTIES on behalf of, or for services benefiting, the participants? (e.g., to Outreach or other university units for lodging, meal plans, etc.)

- Yes** **No**

If yes, please list and explain all such payments.

What classification of students may participate? (mark all that apply)

- University of Mississippi **Undergraduate** or **Graduate** students who are NOT enrolled in classes for credit during the experience (complete Form 7)
- University of Mississippi **Undergraduate** or **Graduate** students who ARE enrolled in classes for credit during the experience (*Financial Aid will review*)
- academic credit for this experience
 - academic credit for other courses not directly related to this experience

Please briefly explain known plans for academic credit (course numbers, etc.):

- High school students concurrently enrolled in UM classes (complete Form 7)

Please briefly explain plans for academic credit. (High school students must meet the Early Admissions requirements to be enrolled in UM courses. LIBA 103 and BIO 100 are options for the research experience).

- High school students not enrolled in UM classes (complete Form 13)
- Individuals who are NOT University of Mississippi students (complete Form 13)

Is funding secured for this program? **Yes** **No**

If yes, provide the funding source(s), if known. (account number and name/description)

Account Number	Account Name/Description

If no, are you currently seeking funding? **Yes** **No**

If yes, briefly describe plans.

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If grant funded, do the sponsored guidelines specifically state whether or how the participants should be paid for the experience? If yes, cite the sponsor and program name for review. Attach or provide link to sponsor guidelines, if available.

Yes **No**

Section F: Additional Information for Programs Involving High School Student Participants

Section F should be filled out for ALL programs involving HIGH SCHOOL STUDENTS.

Program Times

Please list all program times (days of week and times of day) when High School Student Participants will be involved in this experience (under the supervision of the Director).

Site(s) of Experience

Please list the building name(s), room number(s), laboratory(ies), or other locations where these supervised experiences will occur during these program times.

Percent of time in supervised lab experience: _____ %.

Percent of time in supervised field experience: _____ %.

Percent of time in non-lab or non-field activities: _____ %.

Explain all non-lab or non-field activities:

Section G: Health, Safety, Compliance, & Risk Management Plan

Section G should be filled out for all programs involving HIGH SCHOOL STUDENTS

Before working in any lab or field environment that poses risks to health or safety, all minors will be **required** to satisfactorily complete health and safety training appropriate for their research, as described below. The Chair of the department hosting the research experience will ensure that the Faculty Mentor, Assistant Mentors (if any), and all participants, adhere with all applicable Health and Safety regulations/standards as defined by a set of university policies identified by the ARISE@UM Supervisory Board, including:

- the Biological Safety Manual Policy (#10000299)
<https://secure4.olemiss.edu/umpolicyopen/ShowDetails.jsp?istatPara=1&policyObjidPara=10647706>
- the Chemical Safety Manual Policy (#10000302)
<https://secure4.olemiss.edu/umpolicyopen/ShowDetails.jsp?istatPara=1&policyObjidPara=10647712>
- the Radiological Safety Manual Policy (#10000289)
<http://safety.olemiss.edu/safety-programs/radiation-safety/radiological-safety-manual/>
- UM's IACUC policies (<https://www.research.olemiss.edu/iacuc/policies>)

Biological Safety: Persons under 18 years of age will not be allowed to enter a Biosafety Level 3 (BSL3) laboratory (currently, there are no BSL3 labs on the Oxford Main Campus)

Radiological Safety: Persons under 18 years of age will not be allowed to enter, or work in, an area where radioactive materials or radiation producing devices are used, stored or operated.

Chemical Safety: Minors under 16 years of age will not be allowed to enter, or work in, an area where hazardous materials are used or stored.

Animal Research Areas: Minors under 16 years of age are not allowed in animal care facilities.

Institutional Animal Care and Use Committee (IACUC) Requirements: Before engaging in any activity involving live vertebrate animals, participants must meet all training and occupational health requirements and be granted UM-IACUC approval.

Please note that all minors will not be permitted to perform any experiments without direct supervision. If you have questions regarding the safety training, please call UM's Department of Health & Safety at 662-915-5433 or visit their website: <http://www.olemiss.edu/safety/>.

The Chair of the host department will ensure that minors and his/her Mentor Team receive **approval and training in the following areas** before entering the labs/field environments for their research (checked):

- Biological Safety
- Chemical Safety
- Radiological Safety
- IACUC Approval
- Laser safety training
- There are no biological or chemical safety hazards associated with the research laboratory.

Potential hazards associated with the proposed project:

1. Chemical:

Efforts to minimize risks:

2. Radiological:

Efforts to minimize risks:

3. Animal:

Efforts to minimize risks:

4. Biological:

Efforts to minimize risks:

5. Other:

Efforts to minimize risks:

Research Supervision Plan:

There will be several components to the summer research experience:

Reading: Describe if and how the mentor will choose research and technical articles to assign for the participants to read to introduce the background and methodologies behind the research in the laboratory, or any other plan regarding reading.

Individual Meetings:

Describe how and when the mentor will meet with the participant to provide guidance and check progress on the research. For example, there may be a weekly or daily progress meeting, other meetings, etc.

Research:

Describe how the research project will be mentored/directed/supervised.

Supervision of Minors Plan

Mentors will appropriately supervise the participating minors in keeping with UM's Supervision of Minors Policy (#10000843).

At all times in the research lab or field site location, Mentors and the Chairs of the Host Departments will be responsible for ensuring participating minors are supervised in compliance with the University of Mississippi's Supervision of Minors Policy (<http://eorc.olemiss.edu/minors/>).

Explain how participating minors will be supervised during lab times. Provide details that outline how mentors will ensure that no one-on-one contact occurs between participating minors and persons over the age of 18 years of age.

Authorized Adult	Date of Background Check	Date Completed Supervision of Minors Training	Date Scheduled for Supervision of Minors Training
NAME	MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY

Will the high school participants need residential support?

Yes **No**

If yes, have you contacted the Office of Pre-College Programs regarding scheduling and required documents?

Yes **No**

Please share any additional information pertinent to this request:

Section H: Acknowledgement/Authorization

I acknowledge that information provided on this form is accurate to the best of my knowledge and understand that this form and supplemental documentation, if requested, will be assessed by a Student Experiential Learning Program Review Board to determine whether an employment relationship exists for any proposed participant payments, and/or by a Rebel Research Scholars Advisory Board to make recommendations regarding the program and supervision of minors in a research environment. I understand that to knowingly provide misinformation in an effort to be awarded an affirmative determination, may result in the denial of future program requests. The appropriate boards' determination(s) and/or recommendations will be sent to the Program Director and/or Other Contact via email.

*Please detach and use the **Experiential Learning Program/Employment Guidelines** as reference for processing e-forms and collecting required forms from student participants.*

Requests will only be accepted via email submission to studentprograms@olemiss.edu. An email will be sent to the Program Director confirming receipt of the request form.

Please check this box if you are submitting additional documentation to support this request.

Signature of Contact or Program Director

Date of Signature

Signature of Department Head/Chair

Date of Signature

For Student Experiential Program Review Board Use Only

Review Date: _____ Approved Program Number: _____

Does the proposed activity imply an Employment Relationship?

- Yes** **No** **More Information Needed**

Comment:

If no to Employment Relationship, is the threshold met for a Student Program?

- Yes** **No** **More Information Needed**

Comment:

If yes to Student Program, what mechanism(s) should be used to pay participants?

- Participation Stipends via Form 7**
- Participation Stipends via Form 13**
- Financial Aid**
- Travel Reimbursements**

Comment:

For Rebel Research Scholars Review Board Use Only

Date of Review: _____

Does the proposed activity provide adequate information regarding a minor participant's supervision in a research lab?

- Yes** **No** **More Information Needed**

Comment:



Experiential Learning Program/ Employment Guidelines

The following are detailed instructions for processing payment to students who are participating in an approved program or for requesting compensation when performing work with assigned University of Mississippi faculty or staff.

Unless payments are determined to be Financial Aid, students will receive payment/compensation via the University payroll system. Those not actively employed as an hourly student worker, work study, or on a student stipend, must complete a *Student Employment Packet/Payroll Form* which can be accessed at <http://www.olemiss.edu/hr/students.html>. Completed forms must be dropped off at the Department of Human Resources (2nd floor Lester Hall) along with ORIGINAL documentation required for the I-9 form.

If you have questions about the packet or are unsure if a packet must be completed, please contact the Department of Human Resources at 662-915-7431.

Payments to University of Mississippi Student Program Participants

For each UM student who will be receiving a participant stipend, the paying department must process a Form 7 (*Students Paid on a Salaried Basis*).

Complete the form as would normally be processed for student stipends, except for the following fields in the New Employment Information section.

- Select *Student Program Participant* as the Title of Position
- In the pop-up box titled *Approved Program Number*, include the program number that was provided in the determination email from the Review Board
- Effective Date and Termination Date should coincide with the start and end dates provided on the Student Program Request Form

If participants attend the program on an intermittent basis, not consecutive days, then contact Human Resources at 915-1518 for instruction.

Please note; improper completion of the Form 7 may delay payment.

Upon completion of the *Student Employment Packet/Payroll Forms* and Form 7, the participant will receive payment each payroll for the period of time designated on the Student Program Request Form.

Tax Ramifications of Receiving a Program Stipend

All approved UM Summer Experiential Learning Program participation stipends for UM students are processed through the payroll system, even though participation in the program is not considered “employment.” As a result, Program Directors must inform any paid UM student participants that:

- Participation stipends are subject to federal and state tax withholding, which will reduce the gross amount of funds that the student may be expecting.
- Students are strongly recommended to contact Student Employment to obtain an estimate of net funds so they can make their financial plans accordingly.

Financial Aid Ramifications of Receiving a Program Stipend

If the student will be enrolled in *any* UM credit courses that overlap the time period of the experiential learning program, then the stipend must be considered “financial aid.” This is true whether the courses are directly related to the experiential learning program or not. As a result, Program Directors should inform any paid UM student participant that:

- The stipend must be counted in the student’s financial aid package, per federal/state requirements.
- The stipend may impact the student’s eligibility for other aid programs, potentially across the entire Fall/Spring/Summer academic year (depending on the funding source)
- To the extent stipends are applied towards living expenses, students may be prohibited from receiving other aid such as loans or institutional scholarships to help cover these same expenses—this would be considered duplication of funding. In these cases, the other aid may be subject to be reduced (or having a payback applied to the Bursar account).
- “Overawards” can result if the total amount that a student is receiving is more than the Cost of Attendance. (Note that the Cost of Attendance for a student enrolled less-than-half-time is limited to certain expenses only, so large stipends can significantly impact the aid package in these cases.)
- Students who are considering enrolling in UM credit courses overlapping their paid program participation should request an in-person meeting with an employee of the UM Office of Financial Aid to determine how the combination of stipends and classes will be treated in their cases.

Reimbursing UM Student Participants for Program Travel Expenses

Where payments are strictly intended to cover the travel-related expenses of UM students whose program participation requires travel or temporary relocation (e.g. to a remote participation site), it may be more appropriate to reimburse those expenses via UM’s Travel Reimbursement Policy. Travel Advances are possible where students will incur expenses in advance (e.g., airline tickets). Program Directors are encouraged to work closely with Procurement to coordinate the timing, requirements, and necessary paperwork, quotes, receipts, etc. to ensure students receive full advances and reimbursements for qualifying expenses. Reimbursed travel expenses are not considered taxable income to the students. An E-Form 18 should be processed by the paying department—choose the Student Travel Only option.

Payment for Non-University of Mississippi Program Participants

To pay program participants other than UM students (including students from other colleges or universities, high school students, or teachers at other institutions), programs should process a Form 13 (*Payment for Services as Contractor*). These participants will receive a Form 1099 for tax filing (non-employee compensation). Questions should be directed to the Procurement Office at 662-915-7752.

Compensation for University of Mississippi Students Hired for Employment

If the student will be compensated for work performed (as opposed to being provided a stipend for participation in an approved program), then the student must be compensated either through hourly wages or a salary stipend.

If the student employee will be paid with a stipend, then a Form 7 (*Students Paid on a Salaried Basis*) must be processed.

Students hired for hourly work, whether as student employment or work study, will be processed on a Form 18 (*Students Paid on a Hourly Basis*).

Questions about the type of work that is permitted on a stipend should be directed to Human Resources student employee staff in Lester Hall at 662-915-7431.