



UNIVERSITY OF BRIDGEPORT STEM ON WHEELS AGREEMENT

In consideration of the University of Bridgeport arranging a visit to the School/Site by the STEM on Wheels bus and permitting its attendees to participate, FILL IN NAME OF SCHOOL/SITE HERE (hereafter “School/Site”) hereby agrees as follows:

I. SCHOOL/SITE INFORMATION

1. School/Site Name:
2. School/Site Address:
3. School/Site Phone Number:
4. Grade Levels or Age of Attendees participating
5. Estimated Number of Attendees:
6. Special Needs/Requirements:
7. Date:
8. Start Time: End Time:
9. Street address/location for bus parking:
10. List preferred curriculum activities:

<https://www.bridgeport.edu/research-grants/research-development/research-centers/stem-bus>

The School/Site hereby confirms that there is adequate/safe parking on school/site grounds and turn-around space for the STEM on Wheels bus and authorizes parking during the visit at the following specific location on the property (_____). Please provide exact location, (ex., “parking lot behind the school”) and if possible a map. NOTE: The bus is 40.8 feet long, 8.5 feet wide, and 9.25 feet high. The awning is 16 feet x 8 feet when fully extended.

II. CONTACT INFORMATION

A. FOR THE SCHOOL/SITE

Principal or Official Authorizing Bus Visit

First and Last Name:

E-mail:

Primary Phone:

Primary Teacher/Site Contact

First and Last Name:

E-mail:

Primary Phone/Cell Phone: Please provide a number that the STEM bus staff can reach you directly when they arrive:

B. FOR STEM ON WHEELS

Program Director: Dr. Jani Macari Pallis

E-mail: jpallis@bridgeport.edu

Phone: (203) 576-4579

On-site STEM Bus Staff Contact Person:

E-mail:

Phone:

III. The School/Site hereby agrees to complete the following prior to the STEM on Wheels visit:

1. Return UB's STEM on Wheels Agreement signed on the School's/Site's behalf by authorized personnel.
2. Review the **STEM Bus Safety Rules** with children before entering the bus.
3. **Cancellations** - In the event of a cancellation for any reason, please contact Dr. Jani Pallis (office (203) 576-4579, jpallis@bridgeport.edu) within **48 hours**. If the cancellation is weather related a **5 pm** notice is required by the previous evening of the scheduled event.
4. **Grant supported programs:**
 - Limited to 3 hour STEM on Wheels visit
 - 2 week notice is required
 - Maximum 100 children

IV. During the STEM on Wheels visit, the School/Site agrees:

1. The bus will arrive approximately 30 minutes prior to its scheduled visit and the authorized School/Site representative responsible will coordinate activities with the STEM on Wheels staff.
2. Children under the age of 16 who visit the STEM on Wheels bus shall be accompanied by a parent/guardian/teacher/adult staff member responsible for their supervision and safety **at all times** during the visit. The parent/guardian/teacher/adult staff member will instruct students to comply with safety rules and will address any disciplinary issues, including removing a child from the bus, if necessary.
3. **Group visits:** STEM on Wheels visits are limited to 100 children. Children must be in a group of 25 or less. Each group will spend 40 minutes visiting the STEM on Wheels Bus with 5 minutes of transition time. There should be at least (2) adults to supervise children at all times as the STEM Bus has activities that place both on and off the STEM Bus.

PRINT NAME OF SCHOOL/SITE: _____

PRINT NAME OF SCHOOL ADMINISTRATOR, DESIGNEE OR OFFICIAL
AUTHORIZING VISIT:

SIGNATURE: _____

DATE: _____

For UB STEM on Wheels Staff Use Only:

Approval Date:

Project Director Signature: