

## STUDENT HEALTH SERVICES LYNNE P. MEADOWS, MSN, BSN, RN, COORDINATOR

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## NOTIFICATION OF NO WORKERS COMPENSATION, INDEMNIFICATION OR BENEFITS

This is notification to you as a participant in the Applied Learning Experience (ALE) through Board of Regents of the University System of Georgia by and on behalf of Kennesaw State University in cooperation with the Fulton County School District (FCSD) that you are not an employee of FCSD and are not covered by Fulton County School District for Workers Compensation or any other indemnification or general benefit purposes.

Your signature below acknowledges that you have read and understand the above notification.	
Signature of Student	Date
Printed Name of Student	
 Date	Notary Stamp and Signature