

Jackson State University
Service-Learning Course Enrollment Form

Date Submitted:_____ Faculty Name(s):_____

If several faculty members teach different sections with this same activity, list all names above and asterisk the lead faculty member.

Email address for lead faculty member:_____

Phone Number for lead faculty member:_____

Course Number:_____ CRN_____ Course Name_____

College:_____ Department:_____

Do all sections of this course require service-learning? Yes____ No____

What semester will this course be offered? _____Spring _____ Summer _____Fall

Do you need assistance in selecting a site for this course?

If not, what site will be utilized for this course?

1. Please provide a one paragraph summary (approximately 150 words) of how the service-learning experience in this course will meet your course objectives. Please ensure that all six components of service-learning are met in your activities. Also, include the following information: Will this experience be faculty directed or student directed? What type of service-learning will be used?
2. In 50 words or less, please tell us what community need or needs are being addressed.
3. What is the process for placing students with an agency? (e.g. faculty member makes contact with agency and places students, students find agency on their own, students work with agency from previous projects, etc.)
4. Will students work in individually, in groups or both?
5. What assignments are connected to SL? Explain the assignments and how they show a connection between field experience and content.
6. How are you going to evaluate the service-learning experience?
7. What type of reflection activities will you utilize? When would you have students reflect? How would these reflections connect to course content, or would they simply be reflecting on the experience?

Please indicate what day and time will your students present their service-learning project.

I agree to provide evaluative data as required by the Alice Varnado Harden Center for Service and Community Engaged Learning Advisory Committee (submit to kelli-mae.goddard-sobers@jsums.edu). If several faculty teach different sections, the lead contact who will monitor course can sign for group.

Faculty Signature_____ Department Chair Signature_____

Please submit your course syllabus with this form