STUDENT-INITIATED AGENCY APPLICATION

Any student who wishes to complete his/her Service-Learning placement at an agency not included on the EVC Center for Service-Learning & Public Service list of approved sites must 1) obtain the instructor’s permission, 2) have the agency supervisor complete this form, 3) obtain final approval from the Service-Learning Coordinator prior to beginning the placement.

STUDENT INFORMATION

<table>
<thead>
<tr>
<th>Name</th>
<th>Student ID #</th>
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</thead>
<tbody>
<tr>
<td>Address</td>
<td>Semester/Year</td>
</tr>
<tr>
<td>City</td>
<td>Course Name</td>
</tr>
<tr>
<td>State</td>
<td>&amp; Number</td>
</tr>
<tr>
<td>Zip</td>
<td>REG ID #</td>
</tr>
<tr>
<td>Phone</td>
<td>Day/Time</td>
</tr>
<tr>
<td>Email</td>
<td>Instructor</td>
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</tbody>
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Dear Agency Supervisor,

The student named above is requesting permission to complete his/her Service-Learning placement at your agency. In order to maintain the highest possible education experience and safety for our students, we kindly request that you review the following information about Service-Learning to ensure that this placement is appropriate.

Service-Learning is a teaching and learning method that connects meaningful community service with academic learning through guided reflection.

The goals of Service-Learning are:
- to enhance classroom learning (i.e., to connect theory with real world applications)
- to provide direct service that benefits the community
- to promote civic and social responsibility

IN ORDER FOR THIS PLACEMENT TO BE APPROVED, YOU MUST BE ABLE TO CHECK “✓” ALL THE FOLLOWING STATEMENTS

___ This student is not an employee of my agency/organization
___ The service the student provides will directly benefit the community
___ This experience will help the student better understand the needs of our community and how he/she can help make a difference
___ The service the student provides will contribute to his/her personal and professional development (i.e., the service will be meaningful and challenging)
___ My agency will provide a safe working environment, orientation, and on-going support to the student
___ I have reviewed the information provided in this form and am confident that the service experience our agency will provide this student is in line with the goals of Service-Learning

PLEASE ATTACH A BUSINESS CARD AND/OR BROCHURE FROM YOUR AGENCY

Agency Supervisor Signature ___________________________ Date ____________

Instructor Signature ___________________________ Date ____________

Service-Learning Coordinator ___________________________ Date ____________

White: Service-Learning Center Yellow: Student Pink: Agency Goldenrod: Instructor

Updated: 11/11/2010