

EVC CENTER FOR SERVICE-LEARNING & PUBLIC SERVICE

ENROLLMENT FORM

COMMUNITY SERVICE-LEARNING

STUDENT AND COURSE INFORMATION *(To be filled out by student)*

Name _____	Student ID # _____
Address _____	Semester/Year _____
City _____ State _____ Zip _____	Course & Section # _____
Phone (Mobile) _____	REG ID # _____
(Home) _____	Instructor _____
Email _____	Days/Time _____

DEMOGRAPHIC INFORMATION

Major/Career _____									
Age:	Over 18	Under 18	Gender:	Male	Female				
Ethnicity (check all that apply):									
Caucasian	Hispanic/Latino	African American	Asian	Native American	Pacific Islander	Other			
Are you currently affiliated with any of these EVC programs? (check all that apply):									
AFFIRM	ASPIRE	CalWORKS	Enlace	OASSIS	DSP	EOPS/CARE	SEAASE	Veteran's Freedom Center	YESS

PLEASE NOTE:

You MUST have permission from your instructor and the Service-Learning Coordinator to serve at a site OTHER than one listed on the Service-Learning & Public Service web site. Visit <http://www.evc.edu/academics/special-academic-programs/service-learning-public-service/community-partners> for the complete listing.

IMPORTANT!

YOU MUST FIRST FULLY COMPLETE AND SIGN THE WAIVER OF LIABILITY FORM FOR ENROLLMENT IN THE SERVICE-LEARNING & PUBLIC SERVICE PROGRAM.

If you are under the age of 18, YOUR PARENT OR LEGAL GUARDIAN MUST SIGN THE WAIVER OF LIABILITY FORM BEFORE YOU CAN PARTICIPATE IN THE SERVICE-LEARNING & PUBLIC PROGRAM.

Student Signature _____

Date _____