**Service-Learning Plan**

(Instructors to complete details for specific courses)

**Name of Community Organization**  Address:

**Site Supervisor’s Name** ph e-mail

**Student’s Name**  ph e-mail

**Section I: Student**

Below, please describe the learning goals for your service at this organization or site. These should relate to the learning goals in and to your own personal

Course # & section

aspirations for your experience and development.

**1.**

**2.**

**3.**

Below, please list the dates and duration of the visits and service you plan at the site. Be sure these are approved by your site supervisor, and that they meet the requirements of your course instructor.

**Section II: Site Supervisor**

Below, please describe the service that the student will be doing while at your site.

Below, please list an expected timetable or specific parameters of visits you expect to be completed by student.

Student Signature Date

Site Supervisor Signature Date

Course Instructor’s Signature Date