

Service-Learning Faculty Information Sheet

Faculty Name: _____

Dept.: _____

Phone: _____ Office Location: _____

Email: _____

Course Number: _____ Course Title: _____

Service-learning is: _____ required _____ Optional

A. Briefly describe the objectives of the course and the type of placement you have envisioned. [Service may be direct (hands-on), indirect (at the CP organization, behind the scenes), or non-direct (e.g., research a topic for the CP organization)].

B. Will you require a certain number of hours (hours range from about 12 – 25 per semester on this campus, e.g., tutoring, work at a social service organization) or completion of a project (e.g., video, research survey)? Will the class meet at the CP Organization for any of the classes? If so, when?

C. What type of reflection do you intend to use as you process the service experience with your students?

**Please fill this form out and submit it to Brant Harwell via campus mail or email at bharwell@martinmethodist.edu*