



**Service-Learning Course Designation Form**

*This form must be completed for each course you would like designated as a service-learning course. Once you have completed this form, return it to the Office of Campus Life. We will contact you each semester to verify your course information and status.*

Course Name: \_\_\_\_\_

Course Prefix: \_\_\_\_\_ Course Number: \_\_\_\_\_ Section #(s): \_\_\_\_\_

Semester Course will be taught (Circle all that apply):

Fall 2007

Spring 2008

Summer 2008

Name of faculty involved in teaching the designated sections of this course: \_\_\_\_\_

Office Location: \_\_\_\_\_ E-mail address: \_\_\_\_\_ Phone ext.: \_\_\_\_\_

**Please answer and briefly explain the following to the best of your knowledge:**

How is the required service experience integrated into the subject matter of the course, reinforcing course concepts?	
What community needs are addressed by the required service experience? (Please specify: individuals, organizations, schools, expeditions outside the local community, etc.)	
Explain how you will require students to reflect on the service they perform. (At least two reflection components are required; one should encourage group reflection and one should focus on individual reflection.)	
How will you assess the learning derived from the service experience?	
Do your course policies ensure that no student is required to participate in service that creates a religious, political, or moral conflict for the student?	
Explain potential liability issues for students, for community agencies, and for Richland C.C. (Campus Life may assist you in assessing these issues)	
Please attach your syllabus to this form, and highlight the discussion of service-learning and the minimum service hours.	

**Signatures:** Faculty: \_\_\_\_\_ Date: \_\_\_\_\_

Department Dean: \_\_\_\_\_ Date: \_\_\_\_\_

Director, Campus Life: \_\_\_\_\_ Date: \_\_\_\_\_