Service-Learning Site Form for Multiple Service-Learning Classes

This form is intended for students who are taking two service-learning courses at one time and want to use the same site for both service-learning courses. In order for the site to be used for multiple courses, it must meet the learning goals for each course, and be approved by each course instructor. If each course requires a different number of hours, the student would be required to complete whichever hour amount is higher. If each course requires the same amount of hours (for example, 15), the student would be asked to complete 15 hours. Please turn this completed form into the CCBLLR, located in the Union, Room G28.

**Student Information:**

Last Name: ___________________  First Name: ___________________

UWM Email: ___________________  Phone Number: ___________________

Service-Learning Class #1 (Class and Instructor): ________________________________

Service-Learning Class #2 (Class and Instructor): ________________________________

**Service Site Information:**

Site: _________________________________________________________________________

Contact Name: __________________________________________________________________

Description of Service: _________________________________________________________________________
                                                                                       _________________________________________________________________________
                                                                                       _________________________________________________________________________

Please explain why the site above meets learning goals for both service-learning classes:
                                                                                       _________________________________________________________________________
                                                                                       _________________________________________________________________________
                                                                                       _________________________________________________________________________
                                                                                       _________________________________________________________________________
                                                                                       _________________________________________________________________________

Number of hours to complete (agreed upon by both faculty members): _____________

Signature of Instructor #1: ____________________________________________________________

Signature of Instructor #2: ____________________________________________________________

CCBLLR Staff Signature: ____________________________________________________________