

SERVICE-LEARNING COURSE FORM

Academic Year:	Course Instructor:
	Course Number & Section:
	Enrollment Capacity:

1. Are you teaching the above course in the semester noted above? Yes No

2. If yes, are you incorporating a service-learning component into the curriculum? Yes No
If you replied "no" to either of the above questions, please simply return the form to the Center so that we can remove you from the list for this coming semester. We will be in contact again in future semesters. If you are teaching a course next semester and will be incorporating a service-learning component, please answer the questions below.

3. **Key Service-Learning Objectives:**

4. **Current Partners:** Note if the agencies listed are ones you would like to work with for this semester.

Agency	Yes	No	Unsure	Comments

5. Please suggest any new partnerships you would like to add:



6. We look forward to providing in-class assistance to students registering in the database this fall. We intend to visit your course on DATE AND TIME. Our orientation will take up most of one class period but allows us to assist and register all students. If this time does not work, please provide a preferred time below:
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7. Would you like to meet with someone from the Center to discuss the course? Yes No
8. As part of accreditation through the Higher Learning commission, we ask that all service-learning instructors commit to assessing service-learning in their courses. Each semester you teach a service-learning course we will share a Qualtrics assessment form at the beginning and end of each semester. Do you agree to completing the assessment each semester you teach a service-learning course? Yes No
9. Have you visited the community sites assigned to your course? Yes No

If not, would you be willing to join a member of the Community Engagement and Experiential Learning Office to the agency for a site visit? Yes No

10. Please use the space below for any additional information that would be valuable for us to know. For example, if you are not teaching the course, but someone else in your department is and you believe we should be in contact with them, please provide their name and contact email.



*Please return this form to the Community Engagement and Experiential Learning Office
(Union E153) or email it to isinfo@uwm.edu.*

