

COMMUNITY ENGAGEMENT COURSE INFORMATION

COURSE INSTRUCTOR

Name _____ Email Address _____
Campus Address _____ Campus Phone _____
College _____ Department _____
(Business/Engineering & Technology/Liberal Arts/Science)

I am willing to have my course/project featured in PNC, Indiana Campus Compact, and/or local news media publications, including but not limited to promotional materials, print articles, and online websites.

Yes No

COURSE INFORMATION

Course Number _____ Credit Hours _____
Course Title _____
 New Course Existing Course Expected Number of Students _____
Course Syllabus *(please attach)*

COMMUNITY PARTNER ORGANIZATION(S)

*Please fill out the following information for **all** partnering community organizations. Use additional page(s) if necessary*

Organization Name _____
Address _____
City _____ State _____ Zip Code _____
Phone Number _____ Fax Number _____
Website _____
Contact Name _____ Phone Number _____
Title _____ Email Address _____

Community Organization Requirements

- Student Background Check Liability Insurance
- Other *(please explain)* _____

Project Description *(attach additional page(s) if needed)*

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