MISSOURI UNIVERSITY OF SCIENCE & TECHNOLOGY
ACADEMIC SERVICE LEARNING PROGRAM
STATEMENT OF SERVICE NEEDS

Date: __________

Organization Name: ____________________________________________________
Street Address: _____________________________ City: __________ Zip: __________
Contact Person(s): ______________________________________________________
Telephone Number: _____________________________ Ext. __________ Fax: __________
E-mail Address: _____________________________ Website: _____________________
Organization Description/Mission:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Service Learning Opportunities at Your Organization:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Orientation/Training schedule (if applicable):
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Special Conditions or Requirements:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Number of Service Learning Students Needed: __________
Time of Year Needed (Specify date(s), if applicable): ________________
Hours of Operation When Students Are Needed: ________________
Minimum Hourly Commitment Required: Weekly: __________ Other: __________
Do you have liability insurance that covers your organization’s volunteers? YES ___ NO ___
Contact Person’s Signature: ____________________________________________
Comments:

Please complete this form and return it to the office below:
Attn: Dedie Wilson
Academic Support
Service Learning Program
Missouri University of Science & Technology
105 N. Bishop Street ~ 207 Norwood Hall
Rolla, Missouri 65409
573-341-7585 ~ byfieldr@mst.edu