DEFINITION OF SERVICE-LEARNING:
Service-learning is a teaching strategy that uses meaningful community service, combined with guided reflections, to enrich and enhance student learning. Service-learning incorporates two fundamental components:

SERVICE, a project that meets an identifiable community need; and

LEARNING, classroom activities and reflection which connect the service project to the academic curriculum.

INTRODUCTION TO SERVICE-LEARNING:
What exactly is service-learning?
Service-learning is a blending of academic study and community service. Academic credit is given for the actual learning that occurs during the volunteering and not just for the clock hours of service to the community. Students can choose to be placed in one of many available nonprofit agencies, educational sites, and government offices. They are then given specific assignments, based on both an academic learning plan and the specific need of the community site.

Service-learning is, therefore, an effort to promote the fact that much learning takes place when we can connect classroom instruction to real-life situations. Furthermore, emphasis is placed on linking what students are doing at their individual sites with broader community issues and involvement.

What is the difference between service-learning, volunteerism, and internships?
Service-Learning
There are a number of core requirements that students have to meet before they can be given credit for these classes and/or projects. These requirements ensure that students reflect upon what they are doing and evaluate what they are learning.

Volunteering
Volunteering is a worthwhile activity, but we generally do not learn from our volunteering in the same way, nor do we connect it to classroom instruction and academic course content.

Internships
Internships place little or no emphasis on the student providing service to the site, whereas service-learning emphasizes the student making a contribution to the community while the student uses the site as a vehicle for learning.

How do I demonstrate what I am learning and how am I graded?
You demonstrate what you are learning by what you write in your reflective journal, your verbal exchanges with your faculty supervisor, and your final analytical paper. The site-placement coordinator will also be in contact with site supervisors who will provide a
further assessment of your progress. Each participating faculty supervisor will tell you
ahead of time what their basic requirements are for a specific grade.

YOUR RESPONSIBILITIES AS A STUDENT:
-To be open and honest at your site from the beginning
-To participate in any training that is required by the particular agency
-To respect confidentiality
-Maintain professionalism: observe dress codes, report on time, avoid gossip, etc...
-To understand commitments of time and task and to fulfill them
-To seek honest feedback
-To accept guidance and direction when they are offered
-To enter into service with enthusiasm and commitment
-To be considerate of the agency, your supervisor, other volunteers and staff, and any
clients that the agency serves
-To utilize all your talents and experiences in order to do a good job for the agency

Keeping a Reflective Journal
Keeping a journal is an excellent way for you to reconstruct, reflect on, and think about
your involvement experience. Processing your service through your perceptions and
emotions helps you to gain insight into what you are experiencing and how you are
feeling about it. A journal also serves as a useful record of your service and learning.

To be most effective, a journal should not just be a log of events. It should be a way for
you to analyze the activities you are engaged in and the new things you are learning, to
note important events, and to relate your objectives and goals to what you are learning
and doing. A journal is a very personal and individualized piece of work. Therefore, how
you choose to write or develop your journal is up to you.

Below are suggestions of what to include in a journal and what questions you might
want to address.

1. Start off each entry by describing the events
2. Next, describe any impressions that you had. This is your subjective account. You
   may want to include your feelings and perceptions about what happened during the
day about your own behavior and the behavior of others.
3. Finally, it is important to reflect upon how this experience affected you and how it
   relates back to any service and learning objectives that you may have.

Some possible questions to consider are:
*What did you learn about yourself?
*What did you learn about others?
*What about yourself did you share with others? What did others share with you?
*Have any of your feelings or impressions of others changed? If so, how are they
different now?
*Did anything surprise you? If so, what?
*What did you do today that made you feel proud? Why?
*Did anything happen that made you feel uncomfortable? If so, what and why do you think it made you feel this way?
*What did you do that seemed to be effective or ineffective in your service to others?
*What did you do in your work that was enjoyable or satisfying?
*What is one new thing that you learned today?

Remember, a journal is a record of your growth and development during an experience: Whether you read your entries a week or ten years later, looking back on a journal will probably teach you something about yourself.


Guidelines for Writing an Analytical Paper:
I. Description (approximately 1 page)
*What were your duties and responsibilities?
*What was your work situation and environment?
*What are the goals of the agency?
*What skills did you acquire as a result of your service-learning experience?
*How did the service-learning experience evolve and change during the semester?

II. Evaluation (approximately 1 - 2 pages)
*Why are you doing service?
*What does service mean in your life?
*What impact do you feel you had on the community?
*What are the community needs?
*What did you learn from your service-learning experience?
   (About the agency you worked in, the supervisor/s you worked for, the responsibilities of this office/supervisor? About the strengths and limitations of this site in carrying out its responsibilities to the community?)
* What did you learn about the experience of working in an agency/school/government setting?
*What did you learn about yourself - your own strengths and limitations; about how this experience affected
*How could you improve the quality of your service?
*If you were in charge of the place where you volunteer, what would you do to improve it?

III. Integration (approximately 1 - 2 pages)
*How has the service-learning experience changed what you thought you knew about local schools, government offices, community service agencies, or special interest groups?
*How has your experience affected your evaluation of our political system/society?
*Has this service-learning experience helped you to develop a sense of civic responsibility? (i.e. more insight into social/public policy formation and legislation, and how to advocate to make a difference). Give examples.
*What specific problem(s) or issue(s) did you encounter during your service learning experience that either broadened your interest in our political/social system or increased your awareness of connections between community needs and policy formation?*

*How has your experience affected your educational goals?*

*How would you change the service-learning experience to make it a more valuable learning experience?*

*Were there any conflicts between your service responsibilities and learning objectives?*

*Has this experience helped you to integrate knowledge gained in the classroom? Could you see any relevance for/application of any of the theories you have learned in the classroom?*
SERVICE-LEARNING APPLICATION
(To be completed by student)

This application is for the following academic period at Roane State Community College.

Fall _____ Spring _____ 1st Summer _____ 2nd Summer _____ Year _______

Course ____________________________ Student Identification Number _______________________

Name ____________________________________________________________________________

Permanent Address _______________________________________________________________ Zip ___________

Home Phone Number _______________________ Work Phone Number _________________________

*Please list all phone numbers where you can be reached and maintain your current address with Service-Learning faculty and your placement site.

Academic Major __________________________ Career Choice _____________________________

Social Issue(s) of Concern __________________________________________________________

Office/Agency in which you are interested in doing service-learning ____________________________

What would you like to gain from this experience?

Please list work and other experiences and qualifications you have (example, language, and computer skills):

Do you have any personal, physical, or mental complications for which you might need assistance while performing your service-learning duties? ________ If so, please describe:

____________________________________________________        __________________________
Student’s Signature                                                                 Date

___________________________________________________
Student’s Printed Name

Form to be returned to:
Roane State Community College
Director, Service Learning Program
276 Patton Lane
Harriman, TN 378748
SERVICE-LEARNING RELEASE/HOLD HARMLESS AGREEMENT

The undersigned does hereby acknowledge that there are risks of physical harm and injury inherent in service activities including but not limited to, working with people, participating in sports and recreation activities, cleaning and maintenance projects, preparing and serving food, and other service activities, and in transportation to and from service work sites. As partial consideration of being allowed to participate in this activity with Roane State Community College, I hereby assume all risk in the travel and connected activities and hereby knowingly and intentionally waive any and all claims, of whatsoever kind or nature, against such institutions which may arise out of this activity.

I assure officials of the Institution that there are no health-related or other reasons or problems which preclude or restrict my participation in this activity. I assure officials of the Institution that I have adequate health insurance necessary to provide for and pay any medical costs that may directly or indirectly result from my participation in this activity and that I will indemnify and hold the institution harmless. Any and all claims associated with this service activity against the Institution for personal injury and/or property damage resulting from any negligence in performing responsibilities specifically required under the terms of this agreement shall be submitted to the Board of Claims or the Claims Commission of the State of Tennessee. Damages recoverable shall be expressly limited to claims paid by the Board of Claims or Claims Commission pursuant to TCA Section 9-8-301, et. Seq.

I specifically acknowledge that in performing these activities, I am doing so in the status of a student volunteer for the community agency, and not as an employee or agent of Roane State Community College. I further waive any and all claims which may arise from such service, activities, acknowledge that workers compensation benefits are not extended to me in my capacity as a student volunteer and hold Roane State Community College harmless from any of my negligent acts. I further state that I am not in any way an employee of Roane State Community College in any capacity. I have no expectation of receiving compensation or future employment from the agency or the Institution.

In consideration of the State of Tennessee, the Tennessee Board of Regents, and Roane State Community College, the undersigned does for himself, his heirs, executors, successors and assigns, (release, waive, discharge, and covenant not to sue the State of Tennessee, or the Tennessee Board of Regents, its employees, agents, successors and assigns,) or and from any and all actions, cause of action, claims, demands, damages, costs, loss of services, expenses and compensation arising out of, on account of, related to, or in any way connected with the undersigned’s participation in this activity and related activities.

The undersigned agrees to all Rules and Regulations set forth by the State of Tennessee, the Tennessee Board of Regents, Roane State Community College and the agency.

In signing this release, I acknowledge and represent that I have read the forgoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent, and I execute the Release for full, adequate and complete consideration fully intending to be bound by same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this _______ day of ______________________, 20___.

___________________________________________ ________________________________________
Participant                                                                      Witness

Form to be returned to:
Roane State Community College
Director, Service Learning Program
276 Patton Lane
Harriman, TN 378748
REFERRAL CONFIRMATION FORM
(To be completed by agency before student begins service-learning experience.)

Student’s Name: _____________________________________ Date: ______________

Name of Organization/Agency:____________________________________________________

Agency Supervisor:_____________________________________________________________
(Print Name)

Student Duties: ______________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Days and Hours of Service:_______________________________________________________

Begin Date: _____________________ End Date: _____________________________

* * * * * * * * *
I agree to accept the student from Roane State Community College and provide adequate supervision and training at this Service-Learning site. The Agency is responsible for screening applicants as needed for each site.

Signature of Agency Administrator

Title

Signature of Student’s Immediate Supervisor

Address_______________________________________________________________

City/State ___________________________________________ Zip__________________

Phone Number: __________________________________________

Form to be returned to:
Roane State Community College
Director, Service Learning Program
276 Patton Lane
Harriman, TN 378748
VOLUNTEER PLACEMENT AGREEMENT
(To be completed by Agency)

This agreement made the day and year listed below between Roane State Community College (hereinafter referred to as “College”) and ____________________________, (hereinafter referred to as “Agency”), and, for and in consideration of the mutual covenants and promises hereafter made and exchanged, the parties do agree:

That Agency is engaged in public service in the form of ____________________________ and is in need of the assistance of volunteers to perform its function; that the College has encouraged its students to become involved in their community through volunteer efforts. The College will advise its students of the need for volunteers by the Agency and the nature of service that may be required (according to information provided by the Agency).

That the Agency agrees that students accepted by the Agency for volunteer service will in no manner be considered the employees or agents of the College and that the volunteer relationship which is established will be solely between the Agency and the student. Any screening for suitability for volunteer service will be the responsibility of the Agency and not the College. The College makes no warranty of suitability for service of students volunteering with the Agency.

That the Agency agrees not to discriminate on the basis of age, sex, color, race, religion, national origin or disability. That the Agency will strive for a work environment free of harassment.

That Agency will, to the extent permitted by law, hold the College harmless from all claims or actions which may arise by reason of volunteer service being provided to Agency by the students recruited by Agency from the College. Any and all claims associated with this service activity against the Institution for personal injury and/or property damage resulting from any negligence in performing responsibilities specifically required under the terms of this agreement shall be submitted to the Board of Claims or the Claims Commission of the State of Tennessee. Damages recoverable shall be expressly limited to claims paid by the Board of Claims or Claims Commission pursuant to TCA Section 9-8-301, et. seq.

That notwithstanding the foregoing, but not in exception thereto, the Agency, upon consent of the student, will allow the College access to the Agency for the purpose of observation and evaluation of the student’s volunteer efforts and will, if requested, provide to College written evaluation of the volunteer effort of the student in such form and content as may be reasonably requested by College.

________________________________________       __________________________________________
AGENCY                                                                       TITLE

________________________________________       __________________________________________
COLLEGE                                                                     TITLE

DATE ___________________________________     DATE ____________________________________

Form to be returned to:
Roane State Community College
Allied Health Sciences Division
276 Patton Lane
Harriman, TN 378748
VOLUNTEER HOURS VERIFICATION AND FINAL STUDENT EVALUATION

Student Volunteers: When you have completed your hours, take this form to the agency supervisor at your service learning site. Once your supervisor has verified your hours, make sure he/she completes the rest of the form and mails it to the address below.

Agency Supervisor: The student’s grade is dependent upon the timely completion and submission of this form.

Student Name: __________________________________________ Date: ________________

Agency: ____________________________________________________________

Supervisor’s Name: ___________________________________________________

Phone Number: _______________________________

I certify that the above named student volunteered at our agency for a total of ____________ hours this semester.

Please use this grading scale: A, B, C, D, F, or Not Applicable

Dependability ___
Attendance ___
Cooperation ___
Interpersonal Skills ___
Work Ethic ___
Concern for Needs of Community and Clients ___
Client Response to Student ___
Agency Response to Student ___
Overall Evaluation of Performance ___

Based on your experience working with the students from the Service-Learning program, are you/your organization:

____ willing to continue offering service opportunities next semester?
____ interested in discussing further continuation of service-learning placements?
____ not interested in continuing service-learning placements at this time?

Describe the most significant task completed by the student while serving your agency.

Please make any additional comments about your student volunteer or the Service-Learning program that might be helpful in the future.

________________________________________________________________________
Supervisor                       Date

THANKS FOR YOUR PARTICIPATION!

Form to be returned to:
Roane State Community College
Allied Health Sciences Division
276 Patton Lane
Harriman, TN 378748
SERVICE LEARNING LOG REPORT
(Responsibility of student to submit the following form to the instructor)

STUDENT: ___________________________________________
SSN: ________________________________________________
PHONE: ______________________________________________
ADDRESS#1: __________________________________________
ADDRESS#2: __________________________________________
CITY/STATE/ZIP: ______________________________________
AGENCY:______________________________________________
AGENCY ADDRESS:____________________________________
CITY/STATE/ZIP: ______________________________________
AGENCY SUPERVISOR: ______________________________________
PHONE: ________________________________
DATE:__________________________________
# OF HOURS:___________________________

RESPONSIBILITIES:

STUDENT’S INITIALS ___________________________ SUPERVISOR’S INITIALS ___________________________

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Harriman, TN 378748