

NON-ACADEMIC EXPERIENTIAL LEARNING REQUIREMENT

APPROVAL FORM

Advisor Name _____

Student Name _____

Advisor ID _____

Student ID _____

Semester _____

Criteria:

- Will this be a learning experience for the student?
- Is it above and beyond the typical academic experience? (Eg, not a standard lesson, lab, tutorial).
- Will it constitute a minimum of 15 hours of work?
- Typical experiences: non-credit internships, mission trips, service learning, volunteer work, guided research, summer research institutes.

Description of Project (150-300 words) (write below or attach description).

How will the student reflect upon his or her experience (deliverable to advisor): reflection paper (1000 words), journal, presentation (15 minutes or more), other?

Approved

Signature of advisor and date

By signing above, the advisor approves the Registrar's office to enter the student into GNED 303, "Experiential Learning," for zero hours.