A student wishing to complete a CBL Independent Study must complete a proposal based on the following questions. This proposal must be submitted to his/her faculty sponsor prior to registration. All sections must be typed out on a separate document using MS Word.

Community Partner Commitment: It is up to you, the student, to make contact with a Community Partner and discuss the project you wish to do. The Community Partner must sign the bottom of this form to show their agreement in hosting you at their agency.

Faculty Commitment: It is up to you, the student, to make contact with a faculty member. If after reviewing this proposal, the faculty agrees to oversee your Independent Study, they must sign the bottom of this form.

Lastly, a copy of the approved proposal and the Internship Agreement Form must be submitted to the Community Based learning Office in 4 Whitman Annex or send via email to cce@stlawu.edu prior to beginning your Community Placement.

CBL Hours

- How many hours will you be serving each week at your Community Placement?
- How many total hours will you be completing for semester?
- Weekly schedule-What days and times you plan on attending placement each week?
- What semester/year do you wish to complete the Independent Study?

Responsibilities and/or Project Description

- What specific responsibilities will you have at the Community Placement?
- What specific projects or assignments will you be completing at the Community Placement? Please describe each in detail.
- What dates and deadlines are associated with the projects or assignments you will be completing at the Community Placement?
- Is there any required paperwork or training associated with your Community Placement? If so, please describe in detail

Your Expectations of the CBL Experience

- What are your expectations of this Independent Study? What do you expect to learn from this experience?
- Explain how your Community Placement will enhance your learning experience at SLU.

Student Signature: ___________________________ Date: ______________

Faculty Signature: ___________________________ Date: ______________

Community Partner Supervisor: ___________________________ Date: ______________