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| --- | --- | --- | --- | --- |
| Faculty Information | | | | |
| Faculty Name |  | | | |
| Department |  | | | |
| Badger ID # |  | | Office Phone |  |
| Semester of SL project |  | | | |
|  | | | | |
| Fellowship Project Details | | | | |
| Your proposed synopsis of project: (include **the specific class**, **the community partner, and the number of hours** expected from each student) |  | | | |
| Details/other information about the project that would be helpful for the SL committee to consider: |  | | | |
| Any requested help or funds from Service Learning Program: | |  | | |