

ACCESS THROUGH SERVICE

CCI Appointment Date:



Appointment Time:

Call 305-237-3848 to set appointment.
Go to Room 3410 at designated time.

TICKET TO SERVICE-LEARNING

1. Student Name: (Last) _____ (First) _____ (MI) _____

Current contact info: Email: _____

Cell phone or other: _____ Best time to call: _____

2. Referring Resource Advisor: _____

Extension: _____ Email: _____

3. Will student need any accommodations with a service-learning placement because of a disability? Please note on checklist below.

- | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input type="checkbox"/> <u>Wheelchair access</u> | <input type="checkbox"/> <u>Modification to the service learning</u> assignment |
| <input type="checkbox"/> <u>Sign language interpreter</u> | <input type="checkbox"/> <u>Extra time to complete</u> |
| <input type="checkbox"/> <u>Large format print materials</u> | <input type="checkbox"/> <u>One task at a time</u> |
| <input type="checkbox"/> <u>Magnification device (CCTV)</u> | <input type="checkbox"/> <u>Written directions</u> |
| <input type="checkbox"/> <u>Magnification software (ZoomText)</u> | <input type="checkbox"/> <u>Work with a buddy</u> |
| <input type="checkbox"/> <u>Other accommodations – please describe</u> | |

4. Student major/interests (career, personal, particular S-L class, etc.) if known.

5. Please give yellow copy of this form to student. Staple student's schedule to original and forward to Tamica Ramos, Center for Community Involvement-Wolfson, Room 3410.

<p>For CCI use.</p> <p>____ Student reported on time.</p> <p>____ Student rescheduled.</p> <p>____ Student no show.</p>



For more information, call 305-237-3848.