## **Trek: COMMUNITY Request for Alternative Placement**

## STUDENT INFORMATION

I (as the student participant) understand the learning objectives of Centenary's Community Program and will not

serve in projects directly related to preachin opposed to service the needs of the externa		nly seek to serve the needs of the college as
Name:	E-mail Address:	@ my.centenary.edu
Major: Grad Date:	ID:	Centenary Mail Box #
	PLACEMENT INFORMATION	
Organization's Name:	Organization's D	Director:
Address:		State: Zip:
Student's Immediate Supervisor and Title:		
Supervisor's Signature:		Date:
Supervisor's Phone #: ()	Supervisor's E-ma	ail:
** Please Attach a	Copy of the Organization's 50°	1c3 (if applicable) **
	ADDITIONAL INFORMATION	
Please answer the following questions (if more s	space is needed attach additio	nal pages as necessary):
1. What work will you do with this agency?		
What Community needs will your service	project address? Who will be I	nelped and how?
2. What community hoods will your convice p	signot dualous. Who will be t	longed and now.
3. How is this work relevant to your academic	c major and coursework at Cer	ntenary?
Have you previously participated in any co	ommunity service activities or v	vorked in another capacity with this agency?
Yes □ No.	•	volked in another capacity with this agency:
If Yes, please explain:	'	
ii res, piease explain.		
5. Will you be paid for your work with this ago	ency?	
□ Yes □ No	)	
(Stude	nt – Do NOT fill out below th	nis line)
Approved by the Trek Committee:		Date:
-Or-		
Reason for Denial of Request:		