

**Elmhurst College Integrated Curriculum – Experiential Learning**  
**Non-Course-Based Experiential Learning Approval Packet – STUDENT**

The Experiential Learning (EL) requirements of the Elmhurst College Integrated Curriculum (ECIC) are designed to engage students meaningfully in experiences outside of the College classroom through which classroom learning can be applied. There are a variety of ways for a student to fulfill the experiential learning requirement, including semester-long or January-term international education, domestic off-campus experiences (e.g., Chicago Semester, etc.), language-intensive immersion experiences, courses including significant service learning experiences, internships, clinicals, and other similar types of experiences. Experiences may be completed as a part of a course, or they may constitute a course in themselves. In some cases, co-curricular activities with a reflective dimension, after review of the Elmhurst College Integrated Curriculum Committee, could also fulfill the off-campus experience requirement and be transcripted (e.g., Habitat for Humanity).

These Experiential Learning activities must meet the following criteria:

1. Includes at least **15 hours** spent at an off-campus site or combination of sites.
2. Includes a formal reflective component (e.g. paper or activity assigned by an instructor.)

It is important to note that off-campus course requirements should allow for flexible scheduling; **students cannot be required to miss classes to complete off-campus requirements.**

In order to be eligible for these co-curricular opportunities, individual students must submit a completed “Non-Course-Based Experiential Learning Approval Packet” and seek official approval of their selected experience through Dr. Mary Walsh, Director of Service Learning. A list of pre-approved opportunities is available through the Service Learning Program, the CPE, the Advising Office, or academic advisers. **Students must complete the Experiential Learning Waiver, available from Dr. Mary Walsh (**[**walshm@elmhurst.edu**](mailto:walshm@elmhurst.edu)**) before beginning experience.**

**Completed paperwork should be submitted to Dr. Mary Walsh, Director of Service Learning,** [**walshm@elmhurst.edu**](mailto:walshm@elmhurst.edu)**, OM 237, 630-617-3085. Questions can be directed to Dr. Walsh.**

Upon successful completion of the experience, the student’s transcript will reflect the completion of the experiential learning requirement.

**Elmhurst College Integrated Curriculum**

**Experience Approval Packet – STUDENT**

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| **SECTION A (TO BE COMPLETED AT LEAST TWO WEEKS PRIOR TO EXPERIENCE)** |

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Last Name First Name M.I.

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College ID# Email Address Phone Number

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Expected Grad Major 1 Major 2 Minor 1 Minor 2

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Experiential Learning Activity Anticipated start date Anticipated end date Faculty Sponsor/Staff

Describe the experiential learning activity for which you are seeking approval. (See list of approved opportunities on web.) If site is not preapproved, identify site, location and contact person at site:

State and explain the learning outcomes you would like to address during this experience (see B):

Explain in detail the activities you will be undertaking in this experience (the off-campus activity must total at least 15 contact hours). How will these activities assist you in reaching the goals above?

Explain how your previous academic learning will be used/applied in this experience:

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| For Administrative Use  Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **SECTION B (TO BE COMPLETED PRIOR TO EXPERIENCE)** |

The following outcomes are potential components of meaningful experiential learning. Read the description of the outcomes and indicate which three you will address during the experience.

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| **Check if applies** | **Student Outcomes** | **Description of Outcomes** |
|  | Cognitive complexity | Critical thinking, reflective thinking, effective reasoning, intellectual flexibility, emotion/cognition integration, identity/cognition integration |
|  | Knowledge acquisition, integration and application | Understanding knowledge in a range of disciplines (acquisition); connecting knowledge to other knowledge, ideas, and experiences (integration); relate knowledge to daily life (application); pursuit of lifelong learning; career decidedness; technological competence |
|  | Humanitarianism | Understanding and appreciation of human differences; cultural competency; social responsibility |
|  | Civic engagement | Sense of civic responsibility; commitment to public life through communities of practice; engage in principled dissent; effective in leadership |
|  | Interpersonal and intrapersonal competence | Realistic self-appraisal and self-understanding; personal attributes such as identity, self-esteem, confidence, ethics and integrity, spiritual awareness, personal goal setting; meaningful relationships; interdependence; collaboration; ability to work with people different from self |
|  | Practical competence | Effective communication; capacity to manage one’s affairs; economic self-sufficiency and vocational competence; maintain health and wellness; prioritize leisure pursuits; living a purposeful and satisfying life |

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| **SECTION C (TO BE COMPLETED AFTER EXPERIENCE)** |

**Reflection Paper Guidelines**

At the conclusion of your experiential learning project, you will submit a 5 to 7 page reflective paper. The purpose of this paper is to connect your experience to the stated learning outcomes and to create a written record of your experience and learning.

The reflective paper should include:

* A description of the learning experience, which explains what you did and how your previous academic learning was reinforced or challenged during the experience.
* The building of connections between your learning experience and the student learning outcomes.
* An explanation of how the goals you developed for this experience were accomplished. If they were not, explain why.

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| **SECTION D (TO BE COMPLETED THROUGHOUT AND SUBMITTED AFTER EXPERIENCE – AT LEAST 15 OFF-CAMPUS HOURS REQUIRED)** |

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| **Date** | **Time In** | **Time Out** | **Hours** | **Supervisor Initials** |
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Note: Attach additional sheets as needed.

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Student Name (printed)

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Student Signature Date

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Site Contact Name (printed)

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Site Contact Signature Date

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| For Administrative Use  Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ |