



Application for Approval of MTSU Internal Activity for EXL Credit

Experiential Learning
Middle Tennessee State University
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Murfreesboro, Tennessee 37132
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www.mtsu.edu/experience

Information may be typed or clearly written.

Name: _____ MTSU ID: _____

Major: _____ Semester/Year of Experience: _____

Email Address: _____ Start Date/Finish Date: _____

Telephone: _____

MTSU Office/Organization: _____ Supervisor: _____

Office/Organization Phone: _____

Activity Type: (Check one) _____ Participation in campus-sponsored charitable activity*
_____ Participation in individual volunteer activity*
_____ Campus organization leader*

Number of Hours Credit: _____

Activity Description: Answer the three questions below on separate paper.

1. What is the rationale for selecting this activity?
2. What do you expect to learn from the activity?
3. What potential challenges do you expect to encounter while completing this project?
4. What is the time commitment for this project?

Student: _____ Signature: _____
(print clearly or type name)

MTSU Office/Organization EXL Contact: _____ Signature: _____
(print clearly or type name)

EXL Coordinator: _____ Signature: _____
(print clearly or type name)

* Requirements: work at least 40 hours (may do multiple short projects), complete 500 word reflective essay within 2 weeks of completing project.