**Information for Supervisors**

**Student Volunteer Contact Information:**

**NAME:** ____________________________________

**PHONE NUMBER:** ____________________________

**EMAIL:** ____________________________________

**Course Information:**

**SEMESTER:** ________ **RSSW COURSE #** __________

**TOTAL HOUR COMMITMENT FOR THE SEMESTER** ______

**LEARNING CONTRACT DUE DATE:** ________________

**SUPERVISOR EVALUATION DUE DATE:** ________________

**LOG OF HOURS DUE DATE:** ________________

**Student Schedule Information:**

**Start Date:** __________

**Weekly Schedule** (Please include day, start time and end time):

Day________ Start Time_______ End Time_______

Day________ Start Time_______ End Time_______

Day________ Start Time_______ End Time_______

Day________ Start Time_______ End Time_______

**NOTES:** Please include any additional information your supervisor should know including intended modifications of schedule (SUNY vacations, planned family events, etc.)