

**Grambling State University**

**Office of Continuing Education and Service-Learning**

**Service-Learning Canduit Referral Form**

**Form should be filled and submitted by the student.**

**For consideration, you are required to fill and email this form to your Dean for referral.**

**Attach a copy of your resume and an unofficial transcript.**

**The Director of Continuing Education and Service-Learning will contact you with final approval.**

 Insert information below

|  |  |
| --- | --- |
| Student’s Name: |  |
| G#: |  |
| Email Address: |  |
| Telephone #: |  |
| Cumulative Grade Point Average: |  |
| Department:  |  |
| Major: |  |
| College: |  |
| Classification: |  |
| Attach your resume:  |  |
| Attach an unofficial transcript:  |  |
| Referring Party’s Name and Title:***(To be completed by the dean or department head.)*** |  |

Student’s Signature Date Dean’s Signature Date

Reviewer’s Signature Date Director’s Signature Date

(Office of Continuing Education and Service-Learning) (Office of Continuing Education and Service-Learning)

**Dean please email the form to** **pereram@gram.edu** **. In the body of the email indicate “approved” or “denied”. This will serve as your signature.**