Summer Session 2018
VT Shaped Student Inspired Initiative

Directions: Select one session and course per sheet.

Select Session:  ___Session I  or  ___Session II

Instructor Name: ____________________________  Email: ____________________________

Course Subj.(ex: ACIS): _____  Course #*: _____  Course Title: ____________________________

CRITERIA FOR SELECTION

Under each section, describe briefly how this course will contribute to the VT Shaped Student Inspired learning outcomes.

Transdisciplinary knowledge and technological literacy

Informal communal learning

Disciplinary depth

Guided experiential learning

Approvals:

Department Head (print name): ____________________________  Email: ____________  Date: ________

Department Head (signature): ____________________________

Please send a scanned copy of completed form to summer@vt.edu