

## Community Agency Needs Assessment Questionnaire

*Purpose: To place University of Missouri - St. Louis students in service opportunities that allow them to apply what they are learning while simultaneously meeting the needs of the community.*

**Name of Organization:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Email:** \_\_\_\_\_

1. What services do you provide to the community? \_\_\_\_\_

\_\_\_\_\_

2. What potential needs does your organization have that could be filled by a service-learning class?

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3. What other volunteer opportunities do you have/sponsor throughout the year?

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4. Have you worked with UMSL in the past? If yes, please explain how.

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