

SERVICE LEARNING VERIFICATION & REFLECTION

Student Name _____ Year of Graduation _____

Volunteer Site _____ Date(s) of Service _____

Description of Activities _____

For what person or group _____ Total # Hours _____

Sponsor/Supervisor Signature _____ Phone # _____

Email Address _____

All hours completed during the school year need to be turned in *no more than 60 days* following the completion of the activity. Hours completed during summer vacation must be turned in *no later than September 30* of the following fall.

***Service Learning credit will not be given for court mandated community service.**

Attention Seniors: All Service Learning forms must be received by the Career Center *no later than the last school day of January of your senior year* in order to participate in graduation ceremonies. Requirement must be completed by August 1st to graduate and receive a diploma. Religious *instruction* is not acceptable.

The following must be completed in order for your hours to be accepted. Use complete sentences.

1. Why did you choose this organization/site to perform service hours?

2. What skills or knowledge were learned during your service at this site?

3. How did you 'Make a Difference' to the community by participating in this service event?

4. How did the service you performed impact your life?

Student Signature

Date

Service Learning Time Log

Use this side to keep track of hours if you spend more than 1 day at the organization. Total up the hours, write the total on the other side and have the supervisor/adult sign, date and provide a method to contact them, i.e.: phone, email, cell number. Complete your section and submit to the Career Center within 60 days. This form by itself is not acceptable.

Organization _____

<i>Date</i>	<i>Time In</i>	<i>Time Out</i>	<i>Hours</i>	<i>Duties</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total Hours _____