

Student Service-Learning/Volunteer Validation Form

SECTION 1:

Pre-approval - Description of service learning project (must begin after the first day of 6th grade) _____

Signature of person pre-approving (must be a service learning coordinator in the school) _____

HOURS MUST BE TURNED IN BY LAST STUDENT SCHOOL DAY FOR UNDERCLASSMEN AND BY MAY 15 FOR SENIORS

_____ Class Project (Grades 6-12)

_____ Community Project (Grades 6-12)

Completed by Student and Project Supervisor

**All Service-learning projects must be pre-approved by the Service-Learning Building Coordinator

SECTION 2:

Please print or type:

STUDENT NAME:

_____ Last

_____ First

_____ MI

SCHOOL: _____ **GRADE:** 6 7 8 9 10 11 12 **YEAR OF GRADUATION** _____

SECTION 3:

Action Prior to Service:

Organization (What non-profit organization did you plan/talk with?) _____

How does the organization serve the community? _____

Service Action (What community need was met?) ___Community improvement ___Disaster relief ___Elderly assistance

___Environment ___Health ___Hunger & Homelessness ___Literacy and education ___Public Safety ___Youth Development

What was my responsibility? _____

Learning Action (How did it relate to one or more school subjects? Describe what you learned through this service action)

Action of Reflection (How did my experiences make a difference and to whom? How did it affect me?)

SECTION 4:

DATE: Start ___/___/___ Finish ___/___/___ **Total Number of Hours:** _____
(mm/dd/yy) (mm/dd/yy) (over 20 hours a log must be completed. See back)

SPONSORING NON-PROFIT ORGANIZATION: _____

Organization that benefits: _____

Teacher/adult supervisor's name (please print) _____

(May not be student's parent or relative)

Teacher/Adult Project Supervisor's Signature

Date

Phone Number

Student's Signature

Date

School Service Learning Coordinator's Signature

Date

Form must be completed in full to be recorded.

