Verification of Student Service Learning Activity

Instructions: This form must be completed and approved for the student to receive credit for a student service learning activity. Submit this form to the service learning coordinator in your school no later than the end of the semester in which the service is performed. Documentation of service performed in the summer is due on the last Friday in September.

Student Information – To be completed by the student

Name (Please print) _____________________________________________________________

Home Phone _________ - _________ - ___________ Grade ___________

Parent/Contact : Name _______________________________________________________

Work Phone: _______________________________

Student Reflection: Think about your service-learning activity and respond to the following questions in a written Reflection Statement below. If you run out of space below, please use the back of this sheet to continue.

• What action did you perform?
• How did your action benefit individuals in the school/community?
• What did you learn about yourself as a result of your action?

Organization Information – To be completed by the supervisor after the activity has been completed.

Organization: ___________________________________ Phone: ______________________

Address: ______________________________________________________________________

Date of Service: From _______________ To _______________ 

# of days of service ________ # of hours Per Day ________ Total hours __________

Supervisor (Please print name) ___________________________________________________

Signature Supervisor ___________________________________________________________

Hours earned previously _____ + Hours for this activity _____ = Total hours including activity _____

APPROVED: □ Coordinator’s Signature: __________________________ Date:_____________