

Service Learning



Student: _____ Grade: _____ Date Submitted: _____

Check one:

- School Campus
- Church
- Community

Event: _____

Date(s) of Service: _____

Hours / Minutes of Service: _____

Student Signature - My signature indicates that I did the above service as described **without** receiving pay or work experience credit.

Please share any ideas or comments that you feel might improve this event or help create other service opportunities.

To the supervisor: Thank you for your help in this project. Please read and sign below.

I attest that the above service was:

1. Supervised by me.
2. Voluntary with no payment or grade received.
3. Not done in behalf of the immediate family or relative.
4. Performed in the indicated number of hours and minutes.

Service Supervisor:

Phone #: ()

Supervisor Signature:

Date:



Instructions: Fill out bottom portion; cut along dotted line; submit to service coordinator. (Not valid without coordinator signature.)

Student name: _____ Date of Event: _____ Hours: _____ Received: _____