



SERVICE LEARNING DOCUMENTATION

STUDENT INFORMATION

Student Name: _____ Student ID: _____

School: _____ Date of Birth: _____ Year of Graduation: _____ Male Female

Curriculum Area: Arts, Humanities Communications & Media Health & Human Services
 Business & Marketing Engineering Technology, Science & Math

ORGANIZATION INFORMATION

Organization: _____ Department: _____

Address: _____

Description of service:

VERIFYING INFORMATION

Date of Service	Hours Served	Signature of Authorized Supervisor	Date of Service	Hours Served	Signature of Authorized Supervisor
Total Hours			Total Hours		

Evaluation of student's work: Unsatisfactory Satisfactory Exceptional

Comments

Verified by Site Contact _____ Site Contact Signature _____ Phone Number _____

STUDENT / TEACHER

I verify that I have completed the above documented service and understand that I must also complete the Reflection requirement in order to fulfill the service learning requirement for high school graduation.

 Student Signature

 Date

 Teacher Signature

 Date

REFLECTION

“When people reflect in everyday life, they pause to review, ponder, contemplate, analyze or evaluate an experience or information. This ability to reflect gives people the freedom, power, and responsibility.....to continually choose or adjust the direction of their lives.”

James Toole, M.A. and Pamela Toole, Ph.D.

Reflection as a Tool for Turning Service Experiences into Learning Experiences

1. What did you observe during your service learning activity that made an impact on you?

2. How did you feel? What did it make you think about?

3. How was this activity similar or different from other educational activities?

4. What did you learn?

5. How does this connect to what you are studying in your classes?

6. Based on what you have learned, what areas do you need to grow on and make an extra effort?
