**COMMUNITY SERVICE FORM**

*\*\*Use one form per date of service*

*Fill out form completely or hours will not be counted!*

*Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class Pd \_\_\_\_\_\_\_\_\_\_*

*Date of Service \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Actual in/out time of service\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Name Service Organization*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Activity Type/Service Performed*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Organizations Authorized Representative Signature Date Signed*

***Student Reflection***

Students will reflect upon their volunteerism and how it has impacted their life. Students are to answer with *well-written sentences and original answers*. They will be graded on this portion of the hours. Attach this form to a separate sheet with answers to the following:

1. What was the reason I chose this activity/organization?
2. How can this experience be applied to my every day life?
3. How did my volunteering assist others in my community?
4. What was the most challenging part of this service? How did I overcome that challenge?
5. How am I a better person for offering this service?

***Mrs. Henke’s Approval\_\_\_\_\_ Hours Earned \_\_\_\_\_***