

Meritorious Student Service Learning

Governor Thomas Johnson Middle School



This form is to be completed by the student and returned to Mrs. Cole, Service Learning Coordinator, room 233. Service learning credit will not be earned until this form has been correctly submitted. Be sure you write neatly and legibly.

Student Name (First and last name)

Date

Grade

Organization/Group where service will occur

Dates of Service

Hours Earned

PREPARATION

What is your plan for this service learning project?

How does this project help the community?

After completing Preparation, turn this form in to Mrs. Cole, Service Learning Coordinator, room 233, for approval.

Approval: _____ (Mrs. Cole, Service Learning Coordinator)

ACTION

Describe what you did to complete this service learning project.

REFLECTION

How did you feel about your service learning project? What did you learn about yourself and others?

VERIFICATION (This section is to be completed AND signed by the supervisor of the service learning project.)

Project Supervisor Signature _____

Service Learning Coordinator Signature: _____