

# Community Service Learning

Lake Placid Middle/High School

<b>Student:</b> _____	<b>Current Grade:</b> _____	<b>Year of Graduation:</b> _____
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## INTRODUCTION: Community Service Learning Activity

Name the activity and organization:

<b>PART I: School Approval</b>	
The Community Service Learning Supervisor approves the chosen activity:	
Supervisor Signature: _____	Date: ____/____/____

<b>PART II: Projection</b>
Why did you choose this activity?
_____
_____

<b>PART III: Action</b>	
Was the stated Community Service Learning activity completed? YES ____ NO ____ If yes, how many hours did you contribute? _____	Did a parent or guardian participate in this activity? YES ____ NO ____ If yes, how many hours? Parent/Guardian signature required. Parent/Guardian Signature: _____ Hours: _____

<b>PART IV: Reflection</b>
Explain what you have personally gained from this experience (how has it been meaningful to you):
_____
_____
Explain how the community is better because of your contribution:
_____
_____

<b>CONCLUSION: Verification Checklist</b>
____ 1. Did you have the Activity Coordinator fill out the Verification Form?
____ 2. Have all the sections of this form been completed?
Check questions above and then sign below and submit to the Community Service Learning Supervisor.
Student Signature: _____ Date: ____/____/____

# Verification Form

Lake Placid Middle/High School

This form is to be completed by the Event/Activity Coordinator of the organization where your school-approved community service contribution was made.

Name of Organization	Phone Number

Student Name	Time Contributed
	HRS:                      MINS:

Parent/Guardian Participation
Parent/Guardian participated: <input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please note amount of time contributed.    HRS:                      MINS:

Feedback
Thank you for allowing the student to participate. If you would like to make additional comments, please do so here or email <a href="mailto:pmcconvey@lpcsd.org">pmcconvey@lpcsd.org</a>

Additional Comments

Organization Activity Coordinator's Signature	Date

Thank you,  
Lake Placid Middle/High School