

**Caroline County Public Schools Service-Learning Approval/Verification Form**

**CCPS Partner Service Learning Projects:** Caroline County Public Libraries; Caroline County Commissioners Office; Caroline County Historical Society; Caroline County Parks and Recreation; Caroline County Nursing Homes and Assisted Living Facilities; Caroline County Humane Society; Caroline County 4-H; Caroline County Volunteer Fire Departments; Caroline County Habitat for Humanity; Caroline County Hospice; Caroline County Council of the Arts; Tuckahoe State Park; Martinak State Park; Maryland Clean Streams; Saint Martin’s Barn; Samaritan House; Food Pantries and Clothing Banks of any local church; Walk-a-Thons; Relay for Life; Polar Bear Plunge; Municipal Athletic Programs – mentoring; Elks Clubs; Lion’s Clubs; VFW’s; American Legions; Municipal Historical Societies; YMCA, Teen Court.

**Directions:** This form must be completed for ALL service learning projects. Part One of this form must be completed BEFORE you start the project. Pre-approved projects do not need the service-learning coordinators’ pre-approval signature. Part Two of the form must be completed AFTER you complete the project. After the project and both parts of this form have been completed, you must submit the form to the service-learning coordinator for the final approval signature. The service learning coordinator will then submit the form to your guidance counselor for entry into your school record.

**PART ONE**

Printed Student Name: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Grade: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Adult Supervisor – printed name: \_\_\_\_\_

Adult Supervisor Signature: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Printed Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Description of Project/Activity: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Desired Outcome – to be completed by the adult supervisor. What will it mean to the community and what will the student learn by completing this service-learning project? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Planned Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_ # of Hours \_\_\_\_\_

Service Learning Coordinator’s Pre-Project Signature: \_\_\_\_\_

\_\_\_\_\_ Approved \_\_\_\_\_ Denied

Reason for denial: \_\_\_\_\_

**PART TWO**

Student Reflection: What did you learn from this project? How was what you did "service-learning", and how did it impact the community? What would happen if people didn't help others and their community? What are your overall feelings/impressions of your project?

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Student Evaluation: How would you rate your performance? What could you do better next time? What are your plans for future service learning projects? \_\_\_\_\_

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Actual Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_ # Hours Earned: \_\_\_\_\_

\_\_\_\_\_  
Student Signature – Written Reflection                      or                      Teacher Signature – Oral Reflection

Final Project Disposition: \_\_\_\_\_ Approved                      \_\_\_\_\_ Not Approved (reason \_\_\_\_\_)

Service-Learning Coordinator Signature: \_\_\_\_\_