## **Service Learning**

## Plan and Approval Form

Students must complete separate forms for each location and type of service. I will be completing (circle one):

Community Engagement/Volunteer Hours Service Learning Hours Paid Work Experience Hours

Student Name:				
CF ID:				
Date:				
Student Phone #:				
Student Email:				
If you are doing COMMUNITY ENGAGEMENT hours, the following service hours will not count:  1. Court mandated community service. 2. Family related activities or service to family members. 3. An activity where there is no coordinator to evaluate and confirm student performance. 4. Donations or fundraisers. 5. Service for the sole benefit of a religious house of worship and/or its congregation.  I verify that my service hours do not fall into any of the above categories. Student Initial:		If you are doing PAID WORK hours:  1. Work hours where a family member is verifying the completed hours may not count.  2. Work hours must be verifiable by a W-2 statement or paystub.  3. The type of paid work must fit within the criteria specified to qualify for the Service Leadership Program.  I verify that my work hours qualify for the Service Leadership Program.  Student Initial:		
	Community Engagement Hrs.	Paid Hrs.	Service Learning Hours	Combination
leather portfolio earned	50	50	50	50
Briefly describe your com	nmunity service or paid work exp	perience:		
Name of Organization/Bu	usiness:			
Supervisor Name:				
Supervisor Signature:				

For SERVICE LEARNING hours, indica	ate the course title,	course number, professor nan	ne, semester, year:
Student Signature:			
Service Learning Coordinator Signature:			
Circle One:	APPROVED	NOT APPROVED	