Edmonds-Woodway High School 7600 212th Street Southwest Edmonds, WA 98026 (425) 431-7900

Office Use Only:



Shana Lipscomb

College and Career Specialist
(425) 431-6122
LipscombS@edmonds.wednet.edu

EWHS Volunteer Service Credit

Student Application for Elective Credit

Edmonds-Woodway High School encourages volunteer service. However, volunteer service is not a graduation requirement. When students give of their time and talents, they learn about their potential as contributing members of the community. Any planning, training, or performing of service which benefits the community and is sponsored by a <u>non-profit or registered charity</u> will be recognized. This does <u>not</u> mean working for free at a business or helping out a neighbor. Volunteer service for legitimate organizations only, will count towards volunteer service credit hours. *Hours from Mission Trips and Outdoor/Summer camps may not include sleeping, eating and personal (break) time. 8 hours maximum per day are allowed.

A student may request <u>.5 elective volunteer credits by accruing 90 hours of verified service</u>, up to two times during their high school career for a total of 1.0 (elective) Volunteer Service credits.

*IMPORTANT: In order to receive credit, page 2 of this packet must be submitted, with all signatures, BEFORE you begin your

service. See instructions below. Retro-active hours may not apply.

_____ Grad Year_____ Student Student Email Pre-Approval Signature and Date: Service Organization(s) and Supervisor Name(s) 2. Total hours_____ Instructions: Before you begin to volunteer, complete the ESD #15 Application for Volunteer Service Credit Form (page 2 of this packet) and submit the form to Mrs. Lipscomb in the Career Center. • While Volunteering, keep track of your hours on the Volunteer Program Time Sheet (page 3 of this packet). Once you have completed your service, or have completed enough hours for credit, you and your supervisor must sign your Time Sheet to verify your hours. Once you have completed 90 hours, write a one to two page Reflection Essay about your volunteer experience. Reflect on your goals for the experience and whether they were met, how you gained new skills or knowledge, and what you learned about yourself. Essay should be typed, max 12-point font. Attach all forms to this completed Cover Sheet and turn in to Mrs. Lipscomb in the Career Center. Once Mrs. Lipscomb has received all items (Volunteer Service Credit Form; Packet Cover Sheet; Time Sheet: Reflection Essay) you will receive 0.5 credit for your 90 hours. You may earn a maximum of 1.0 credit for 180 hours total.

Credit Issued_____ Date to Registrar_____

Hours Recorded in System _____

EDMONDS SCHOOL DISTRICT #15 APPLICATION FOR VOLUNTEER SERVICE CREDIT



Edmonds-Woodway High School encourages volunteer service. When students give of their time and talents, they learn about their potential as contributing members of the community. Any planning, training, or performing of service that benefits the community and is sponsored by a non-profit organization will be recognized.

A student may request a .5 elective volunteer credit after accruing 90 hours of verified service, up to two times during their high school career. You MUST keep copies for your records, but bring this form to the Career Center for pre-approval prior to requesting credit.

CONTACT INFORMATION			
Student Name:		School:	Grade:
Mailing Address:		City:	Zip:
Student's Email:	And an analysis of the second	Phone:	· · · · · · · · · · · · · · · · · · ·
Service Organization:		Start Date of Service:	
Supervisor Name:		Phone:	and the second s
SUMMARY OF LEARNING GOAL Describe your intended learning goals		end to learn or skills you intend to de	evelop through this experience)
Describe the service tasks, setting, loc	cation, and intended frequency. (F	o not include travel social meal o	r sleep time)
because the control materials, tech	zaon, and intended nequency. (E	o nocarolado a avoi, ocular, modi, o	a dioop amoj
			*
		p.	
STUDENT AND PARENT AGREE Student and Parent/Guardian(s) acknow these experiences, and private transparent/guardian(s). The Edmonds Stransportation to service locations and	owledge and agree that all decision portation to and from volunteer seems. School District assumes no response	services site(s) are the complete, sonsibility for arranging volunteer s	sole responsibility of the student and
Student's Signature	Date	Parent/Guardian's Signature*	Date

The Edmonds School District, as an educational institution and as an employer does not discriminate on the basis of race, religion, ethnicity, national origin, age, disability, sex, marital or veteran status. This is a commitment made by the District in accordance with federal, state and local laws and regulations.

TIME SHEET EDMONDS-WOODWAY HIGH SCHOOL VOLUNTEER PROGRAM

dent Name:Graduation year									
olunteer Site:									
pervisor's Name: _				Supervisor's Telephone					
DATE	ARRIVAL TIME	DEPART TIME	TOTAL HOURS		DATE	ARRIVAL TIME	DEPART TIME	TOTAL HOURS	
								Alle	

					I verify that the above st	udent has volunteered_	houn	3.	
otal hours on this ti	me sheet:		*****	Super	visor's Signature				
olunteer's Signatur	e			Date_					
ate					rvisors ~ Please sign and o		completed		