

MARANATHA CHRISTIAN ACADEMY

MARANATHA CHRISTIAN ACADEMY COMMUNITY SERVICE PROGRAM Evaluation Supervisor Form

(Supervisor: Please return to student to be turned into the school)

Student Name _____ Date work performed _____

Number of Hours Worked _____ Agency _____

Supervisor Signature _____ Supervisor Phone Number _____

Brief Description of Student's Duties: _____

Please Evaluate the Student —Please Check One in each category:

Trait	Excellent	Good	Poor	
1. Attendance/Arrive on Agreed Time				The Purpose of the Community Service
2. Follows Directions				Program is to fulfill the principles and
3. Personal Appearance				mission that Maranatha students should
4. Initiative/Work Ethic				be in the community--helping others.
5. Did this student receive any type of pay for their service? ____ Yes ____ No (please check one)				It is our faith-in-action.

Comments: _____

Thank you for allowing our students to volunteer for you. Please feel free to call the school office (913.631.0637) if you have any concerns.
Mr. Dave Keener, Secondary Principal

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Evaluation Student Form

(Student: Please fill out and return to the office.)

Student Name _____ Graduation Year _____

1. Describe your service project: _____

2. Why did you pick this particular project? _____

3. What was the most rewarding part about your volunteer experience? _____

4. What difficulties did you experience? _____

5. What Character traits did you learn about yourself helping here? _____

6. Did you receive any pay for this service? ____ Yes ____ No (Please check one)

I Timothy 6:18-19: "Instruct them to do good, to be rich in good works, to be generous and ready to share, storing up the themselves the treasure of a good foundation for the future..."

Required hours: 9th – 10 hours; 10th – 20 hours; 11th and 12th – 25 hours

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