



Community Service for Credit Counselor / Student Agreement

Student Name: _____ Student ID #: _____

Counselor Name: _____

Congratulations on creating your own learning experience. Southridge values the dedication and commitment shown by students when participating in service to their community. We know that some of the most powerful learning a student does during high school can come outside the regular classroom and we want to recognize this contribution.

- 60 volunteer hours = 0.5 community service credit with a 'P' grade
- 120 volunteer hours = 1.0 community service credit with a 'P' grade
(partial credit will not be awarded)

Hours accumulated beyond 120 will not be transcribed, however students can continue to work towards the 200-hour award recognized at graduation. Speak with your counselor about this opportunity.

Requirements:

- Signed agreement with the student's counselor before experience begins
- Volunteer activity must have agreement with site supervisor who will also sign your time log
- This CANNOT be a paid experience
- Volunteer hours can be performed during the summer. This will be agreed upon with your counselor
- Hours served must be documented through time log (on back)
- Hours must be recorded on the time log and a personal reflection must be submitted to counselor by May to have transcribed for that year

Personal Reflection: Write a thoughtful 1 page reflection about your volunteer experience per 60 hours. In this reflection, please include:

- What did you learn during your experience? Did you face a challenge or solve any problems?
- What skills did you learn that could be applied to school?
- What skills did you learn that could be applied to the workplace?
- Write about your post-high school goals? How will this experience help you reach your goals?



Community Service for Credit Time Log

Student Name: _____ Site Location: _____

Site Supervisor: _____ Site Supervisor Phone number: _____

Counselor Signature of Agreement: _____ Start Date: _____ End date: _____

DATE	Hours Worked	Site Location	Supervisor Signature

Total Hours: _____

This Section to be completed by the counselor

☐ Met ☐ Not Met- Reviewed by: _____ Date: _____

Credit (E620x): ☐ 0.5 Pass ☐ 1.0 Pass