

Application

Student Information		
Student Legal Name		Student ID:
Date of Application		Anticipated Date of Graduation
Project Start Date:	Project End Date	Anticipated Number of Service Hours (minimum 10)
Project Information		
Description of Project:		
Please note, when serving community organizations outside of Boyertown Area School District: • These non-BASD organizations may wish to share your child's image, etc. on social media, websites, in print media, etc. to promote the event, celebrate achievements, and more. BASD's publicity agreements do NOT extend to outside organizations. • The non-BASD organizations may or may not serve alcohol at their events. Participation in these events is solely at the parent/guardian's discretion. • BASD does NOT provide supervision for volunteer hours at events hosted by outside organizations. • BASD is not liable for volunteer activities that take place at events hosted by outside organizations.		
Project Goals:		
Anticipated Impact/Contribution to the Community:		
Sponsoring Organization:		
Adult Supervisor Name:	Phone:	Email:
Student Signature:		Date:
Parent/Guardian Signature		Date:

Administrative Information	
Approving Homeroom Teacher:	
• Application Approved Approval Date:	• Application Disapproved Disapproval Date:
• Successful project completion verified via receipt of signed Student Documentation Log.	
Homeroom Teacher Signature	Date:

Student Documentation Log

Student Name: _____

Date	Tasks Performed	Minutes/Hours Completed
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
Must complete 10 hours total.		Total Hours =

Supervisor Signature: _____ Date: _____

****Students must upload both the HR Teacher *Application Form* and *Student Documentation Log* into their Smart Futures account to complete the Service Learning Project.****