



## Student Service-Learning Verification Form

Complete this form in blue or black ink and submit to the School-Based Student Service-Learning Coordinator.

**Submission Deadlines for this Student Service-Learning Verification Form:**

- \* October 15 (for any independent hours obtained between July 1 and August 30)
- \* January 31 (for any independent hours obtained between September 1 and January 31)
- \* July 15 (for any independent hours obtained between February 1 and June 30)

**Section to be completed by the student:**

Student Name: \_\_\_\_\_ Student Number: \_\_\_\_\_  
 School: \_\_\_\_\_ Student Telephone: \_\_\_\_\_  
 Student Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_ Grade in school \_\_\_\_\_

Remember that any Student Service-Learning independent activity must meet the Maryland State Department of Education's 7 Best Practices and include preparation or research, action, and reflection:

- ✓ *The Student Meets a Recognized Need in the Community.*
- ✓ *The Student Achieves Curricular Objectives.*
- ✓ *The Student Gains Necessary Knowledge and Skills.*
- ✓ *The Student Plans Ahead.*
- ✓ *The Student Works with Existing Service Organizations.*
- ✓ *The Student Works with Existing Service.*
- ✓ *The Student Reflects Throughout the Experience.*

**Student Assessment of Service-Learning Activity**

**I. Discuss your preparation for the service-learning activity/activities by completing the prompts below.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**II. Describe the service-learning activity/activities that you completed.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section to be completed by organization representative for independent hours:**

Organization Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Supervisor/Teacher: \_\_\_\_\_ Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_

