



Student Service Learning Form

Student's Name: _____ Advisory: _____

Agency Name: _____

Agency Supervisor: _____

Address: _____

Supervisor's Telephone Number: _____

Supervisor's Signature: _____

Starting Date: _____

Ending Date: _____ Total Hours Completed: _____

EVALUATION

What service did this student provide?

How would you rate this student's performance? (please circle)

Excellent Good Satisfactory Fair Poor

Additional Comments:

If you have any concerns or questions, please call Our Lady Academy (228) 467-7048

OUR LADY ACADEMY

Ministry Project Reflection

Directions for reflections:

1. *Write one reflection per service project completed, answering every question in complete, thoughtful sentences. If more space is needed, staple additional paper to the back of this one.*
2. *Complete the visual exercise at the end of the reflection questions.*
3. *Summer service project reflections should be turned in no later than September 8. All service hours are to be turned in during the quarter they are completed or they will not be accepted. The last day for all service projects to be turned in for the school year is May 5.*

STUDENT INFORMATION

Name _____ **Class** _____ **Date** _____

1. *Why did you choose this project? What need were you attempting to meet?*
2. *What were your primary duties and responsibilities during this project? Think about what you actually did to complete this service.*
3. *What type of service did you perform (which of the Spiritual of Corporal Works of Mercy), and who will benefit from the service you performed?*
4. *Would you participate in this service again? Why or why not?*
5. *In what ways did you see Christ in others in this project? In what ways did you live Christ's teachings through this project?*
6. *List the gifts, talents, or skills you used in service to others during this project?*

VISUAL EXERCISE – *On the back, attach a photograph representing your project.*