



MAKING A DIFFERENCE...MINER STRONG

Block CH – Service Learning Form

DUE to Classroom Teacher – May 15, 2017

Student: _____ Gr: 4 5 6 Teacher _____ Room _____
(Please Clearly Print Name)

In order to receive credit for the Service Learning Section, students must volunteer at a community organization for a **minimum of 3 hours during the 2016-2017 school year**. The list below is meant to be a guideline and/or suggestions on where to go for community service opportunities. Please check with your child’s teacher to ensure your volunteer organization meets the requirement. The following examples below are examples of acceptable organizations:

- SPCA
- Boys and Girls Club
- Poverello House
- Community Food Bank
- Children’s Hospital or Care Facilities
- Other (to be checked by the child’s teacher) _____

****Special Note:*** Volunteer opportunity should not be a part of the student’s DI or Robotics Community Service Project.

I hereby request that the above checked item(s) count toward my community involvement as sponsored by the following organizations during the 2016-17 school year.

Name of sponsoring organization(s):

My leader, supervisor, or representative of the above organization has judged my participation (3 volunteer hours during the 2016-2017 school year) to be satisfactory and in keeping with the spirit of the **Copper Hills Code of Participation for Block CH Community Service**, as certified by his/her signature below. This activity meets the criteria for the Service Learning category as outlined in the Block CH Handbook. Parents may not sign the sponsor certification. It must be signed by a person who works for the organization served.

Student Signature

Parent/Guardian Signature

SPONSOR CERTIFICATION

I certify that the individual named above volunteered for _____ hours during the 2016-2017 school year as a member of the organization indicated above and has actively participated in a consistent and acceptable manner. I recommend that she/he be granted credit toward the Copper Hills Block CH Award for Service Learning. If you have any questions, you may contact me at this phone number _____.

Print Name

Signature

Title

Name of Organization

Date