

Now What?

Name _____ Homeroom _____

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| I, _____, am signing this form to verify that (name of person receiving service) |
| _____ completed _____ (student's name) (#) |
| hours of service work at _____ on _____ (name of organization or where service was completed) (date) |
| X _____ (signature) |

Thank you for completing your service requirement for this quarter. In order to receive full credit, please choose 3 questions (any three you choose are fine) to answer in paragraph form with a minimum of 4-5 sentences for each answer. Please attach your answers to this sheet. Also, please remember to have your sheet signed by the person whom you served. (That person might be the director of the organization or the person that you served directly. The person signing this form should not be an immediate family member.)

Place of Service: _____

- 1.) What types of activities/organizations are currently taking place throughout the city that help in the same way you did while serving? (You might have to do a little bit of research on-line to answer this question.)
- 2.) Would you be interested in learning more about helping/serving like you did for this quarter's service hours? What resources can you use to learn more about serving?
- 3.) What would you say to your peers to encourage them to serve?
- 4.) Overall, throughout this year, what was your favorite service project? Why?
- 5.) Do you plan to research and find service projects that interests you?
- 6.) What type of service interests you most? Why? (Example: You might really enjoy working with children; therefore, enjoy volunteering at Day Spring.)

Answer questions on a separate sheet of paper.