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COMMUNITY SERVICE PROGRAM
BETHLEHEM AREA SCHOOL DISTRICT

Approved Agency Application & Time Card

Complete this form using agency information found in the Community Service Directory.

Name of Student _____ ID# _____ LHS/FHS _____
(Please circle)
Address _____ Phone No. _____
Street City Zip
HR ___/VT ___ HR Teacher _____ Grade _____ Year of Graduation _____

To be Completed by Agency Personnel

Name of Agency* _____
Phone No. _____ EmailAddress _____
Description of the Planned Service Experience _____

Site Supervisor _____
Print Name Signature
Contact Person (if different than Site Supervisor) _____

Date service began ____/____/____ Date service ended ____/____/____
mm dd year mm dd year

Record each day you volunteered below.

Date of Service	Hours	Date of Service	Hours	Date of Service	Hours
1		9		17	
2		10		18	
3		11		19	
4		12		20	
5		13		21	
6		14		22	
7		15		23	
8		16		24	

Total Hours _____ **Verified by:** _____
(Signature of Supervisor)

This Agreement Approved by:

Student Signature Student Number Parent/Guardian Signature

Guidance Counselor Signature Date

Be sure to complete the reflective journal on the back of this form!

This form should be returned to the High School Counselor at the completion of service.

JOURNAL ~ Reflect on your volunteer experience as you complete each prompt.

What was your role at your community service site? _____

How did you help the recipient(s) of your community service? _____

What have you learned about the community through this project? _____

How did you grow personally from your experience? _____

Would you recommend this agency to others? Why or why not? _____

STUDENT RESPONSIBILITIES

- | | |
|--|---|
| 1. Complete required district and agency paperwork as you begin service. | 4. Be punctual and reliable. |
| 2. Record all hours accurately for each day and have the time card verified by the site supervisor. | 5. Dress appropriately. |
| 3. Reflect on your experience by completing the journal. | 6. Maintain a professional attitude at all times. |
| | 7. Inform your counselor of any work-site problems and community service issues. |

Community service activities should actively engage students in tasks that:

1. are developmentally appropriate and supervised/mentored by a responsible adult,
2. provide needed services to the community or to service agency clientele,
3. provide tangible benefit rather than limited solely to housekeeping duties or chores,
4. promote career exploration and work force skills,
5. emphasize benefits to both youth and society,
6. emphasize assumption of the responsibilities and obligations of life as well as enjoyment of its privileges, and
7. promote healthy psychological, intellectual, and social development, including self-esteem and self-actualization

These activities should not:

1. include activities involving alcoholic beverages unless a parent has signed a waiver, to be held by the Bethlehem Area School District,*
2. involve operation of motor vehicles or use of machinery that requires technical training,
3. be illegally discriminatory in relation to age, color, disability, national origin, race, or sex,
4. pose unusual safety risks,
5. support agencies whose volunteer activities may support partisan political organizations, religious instruction, or proselytizing,
6. provide private or personal financial gain,
7. displace paid employees, or
8. support businesses that are not non-profit.

* The Parental Waiver must be completed for any agency where alcohol may be served, or no credit will be given.

**This form should be returned to the High School Counselor at the completion of service.
Be sure to make a copy of the completed form for your records.**