



Service Learning

T I M E L O G

Name & Email:

Homeroom:

Home phone:

Cell phone:

Date	Start time	End time	Activities/Duties for the day	Total Hours
5/31				
6/1				
6/2				
6/3				
6/6				
6/7				
6/8				
6/9				
6/10				
6/13				
6/14				
Supervisor Signature:	I certify that	the above named student worked the hours listed above:		



Service Learning

T I M E L O G

Name & Email:

Homeroom:

Home phone:

Cell phone:

Date	Start time	End time	Activities/Duties for the day	Total Hours
5/16				
5/17				
5/18				
5/19				
5/20				
5/23				
5/24				
5/25				
5/26				
5/27				
Supervisor Signature:		I certify that	the above named student worked the hours listed above:	

(over, please...)

5. What lessons learned during this month are you most likely to use as you go on to college? Future Careers?

6. In what ways were you able to provide a service to the community and/or your employer?

7. Did this experience influence your thinking on future careers? If so, how?

8. Would you recommend participating in this program to future seniors at City Honors?

9. Briefly comment about your overall experience with the Senior Year Service-Learning Initiative.