

Quincy University

SERVICE LEARNING INSTRUCTIONS AND VERIFICATION FORM

1. Complete your service hours. For those students needing to complete 30 hours for graduation, you may earn up to 28 hours in on one service activity, three different activities are required. (Transfer students completing 20hr need two different activities, 10hrs only one activity.)

PLEASE NOTE: Unapproved activities will not count towards service learning hours. If you are uncertain if your activity is approved or not, please see David Beuttel or email servicelearning@quincy.edu. To seek approval for your project, please fill out the project approval form located in the QUEST Center.

2. Keep track of the activity on the service verification form and remember to have a supervisor sign for your total hours earned. You may track multiple service experiences with one log. Logs are to be used for one year.

3. When you are finished with all of the hours you are going to complete for the semester, attend a Service Learning Reflection. **You will need to have this form signed by a reflection leader.** A Reflection is required every year service learning hours are complete. Service Learning Reflections will be held toward the end of each semester. Reflections will be in **Francis Hall Room 208 at 3:30 p.m. and 9 p.m.** on the following dates:

Monday, Nov. 12th
Monday, Nov. 26th
Monday, Dec. 3rd

Monday, April 8th
Monday, April 15th
Monday, April 29th

4. After attending a reflection, submit your hours on the QU website. (<https://www.quincy.edu/academics/service-learning/>). Click the “submit service hours” tab. Your hours will be tracked after you have submitted all of the required documents through the electronic form. PAPER FORMS ARE NO LONGER ACCEPTED!

Questions? Contact:
David Beuttel, Experiential Learning Specialist
QUEST Center (SSC)
beuttda@quincy.edu
217-222-8020 ext. 3356



Quincy
University

2018-2019 Service Learning Verification Form

Student Name: _____

I.D. Number: _____

REFLECTION VERIFICATION

- **Date of Reflection Attended:** _____
- **Signature of Reflection Leader:** _____

TO BE COMPLETED BY THE SUPERVISOR(S):

- **Service Site:** _____
- **Total Number of Service Hours Approved for this location/service:** _____
- **Signature of Supervisor:** _____ **Date:** _____
- **Telephone:** _____ **E-Mail:** _____

TO BE COMPLETED BY THE SUPERVISOR(S):

- **Service Site:** _____
- **Total Number of Service Hours Approved for this location/service:** _____
- **Signature of Supervisor:** _____ **Date** _____
- **Telephone:** _____ **E-Mail:** _____

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UPLOAD THIS DOCUMENT

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