

Community Service Project

Date

Dear Community Service Project Supervisor:

_____ is a student at the Rock Academy. As a student at this school, he/she is required to perform community service each year. The student may not receive any monetary compensation for the community service completed. In addition, the community must benefit from the student's participation. As part of the project, the student must submit a record of his/her hours in addition to a two-page reflective essay.

Please provide the student with an evaluation of the student's performance at the conclusion of the service (a form is printed on the back of this letter). Feel free to send the evaluation in a sealed envelope with the student if you desire. An evaluation on your organization's letterhead of his/her performance can be in lieu of the letter.

Should you have any questions regarding this project, please do not hesitate call us at (619) 764-5200.

Sincerely,

The Rock Academy
2277 Rosecrans Street
San Diego, CA 91915



SUPERVISOR'S EVALUATION

Dear Supervisor:

A confirmation of the total hours completed typed on the letterhead of the organization can be substituted for this page.

Thank you for participating in the Community Service component required of all students Jr./Sr. High at the Rock Academy. Please spend a minute evaluating the student.

1. Student Name _____
2. Capacity of Volunteer Service _____
3. Organization Name _____
4. Address of Organization _____
5. Supervisor's Name _____
6. Phone # _____
7. Total Amount of Hours Completed _____

	OUTSTANDING	MEETS EXPECTATIONS	NEEDS IMPROVEMENT
7. Quality of work			
8. Cooperates with others			
9. Follows instructions			
8. Shows initiative			
10. Attendance and Punctuality			

Supervisor Signature Date

Organization Stamp
(or initials in lieu of stamp)

Thank you for your time!

The Rock Academy
2277 Rosecrans St.
San Diego, CA 91915
619.764.5200

_____ Received by Bible Teacher Date	_____ Processed by Registrar Date
--	---