

APPENDIX 5 – Part II

St. Margaret's School

**Community Service Completion Form and Self
Assessment of Project**

Student Name _____ Year you will graduate _____

Community Service Project: _____

Dates you worked on this project: _____

Supervisor's Name and Phone Number: _____

Time spent on this project: _____

Answer the following questions on a separate sheet of paper, attach it and return to the School Life Office.

1. Describe what you actually did for your project.
2. What were your expectations and anxieties going into your project the first day? Were they realistic? What did you discover that you did not expect?
3. Who had the most impact on you? Why?
4. Who did you have the most impact on? Why?
5. What was the best thing that happened?
6. What was the highlight of your experience?
7. What did you learn about yourself, others, and the conditions or situation around your project's setting?
8. Would you recommend this project for another St. Margaret's student?

Student's Signature: _____ Today's Date: _____

Return to the School Life Office upon completion.