Independent Service Project

Member: _____

Description and Reflection of Independent Service:

Please attach a one to two page reflection on your service project that includes the following:

- Description of the service project – what the project was, organizations you served with, anyone you collaborated with.
- Results and impact of project
- What did you learn or gain from the project?

Log of Independent Service Hours:

Date: *Description of Activity:* *Number of Hours**

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Total Hours Served: _____

_____

Member Signature Date

_____

Authorizing Official Name Position/Title

_____

Authorizing Official Signature Date

*A total minimum of 15 and maximum of 30 hours should be committed to the Independent Service Project.