

Service Project Report Sheet

PLEASE RETURN THIS FORM AFTER COMPLETION OF A SERVICE PROJECT

Name of Group Sponsoring Event: _____

--Service Project Information--

Name of Event: _____ Date of Event: _____

Location of Event: _____

Length of Time: _____

Who benefited from your service project: _____

--Service Project Evaluation--

Briefly explain the service project and whom it served:

Was the event a success? Why or why not?

What feedback did you receive from participants?

What changes would you make about this service project (if any)?

Signature of Club President: _____

Signature of Director of Clubs and Organizations: _____