



**Chaminade-Madonna College Preparatory
Student Activities Office**

Student Service Learning Form

For: Approved Organizations and Agencies

This Service-Learning Agreement is designed to be used in conjunction with hours logged digitally through the online Service Learning form or the hours will not be accepted.

Student's Name: _____ Student ID#: _____

Total Hours Completed: _____ Date(s) of Service: _____

Name of Agency or Organization: _____

Supervisor Name (print clearly) _____

Supervisor Signature (mandatory): _____ Date: _____

For any questions or concerns contact:

Julie Daligney

Service Learning Coordinator

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Chaminade Madonna College Preparatory

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