**SHIRK SCHOLAR REPORT FORM**

**Student Information**

Name: ____________________________  Year of Graduation: ______________


**Volunteer Information**

Agency Name: ____________________________

Supervisors Name: ____________________________

Supervisors Phone Number: (______)__________  Supervisors E-mail Address: ____________________________

Brief Description of Duties:

__________________________

__________________________

Supervisors Signature: ____________________________

Total Hours Completed: __________

**Evaluation**

Evaluation by student (to be completed after top portion of form as been completed)

On a scale from 1-5 (5 being the highest) how would you rate your experience?  □ 1  □ 2  □ 3  □ 4  □ 5

Please note what you would do differently:

__________________________

__________________________

__________________________

How did engaging in this service project impact you individually:

__________________________

__________________________

__________________________

Would you recommend this experience to other students?  □ Yes  □ No

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FOR VOLUNTEER CENTER USE ONLY

Date Received in Volunteer Center: ____________________________  Received By: ____________________________