

School You Will Be attending Fall 2010 _____ Grade Level Fall 2010 _____

DAVIS DISTRICT SERVICE LEARNING

Student Internship Application

PERSONAL DATA

Student Name _____ Home Phone _____ Cell Phone _____
Age _____ Birth Date _____ E-mail Address _____
Home Address _____ City _____ State _____ Zip _____
Parent/Guardian Mother _____ Father _____
Social Security Number _____ Student Number _____

COMPANY/AGENCY INFORMATION

List the agency, contact name and telephone number where you will be conducting your Service Learning experience. **The address must be where YOU will be volunteering and where we can contact you.**

Company/Agency _____

Address _____
City _____ Zip Code _____

Supervisor's Name _____ Phone # _____ E-mail _____

SERVICE LEARNING INFORMATION

Write a short description of what you will be doing as a volunteer at your agency:

When will you be volunteering?

Days: (Circle all that apply) S M T W TH F S

Time: Start time: _____ End time: _____

* If your schedule varies, you need to provide the WBL coordinator with a calendar.

Why are you interested in receiving Service Learning credit?

What do you hope to learn through Service Learning?

I have prepared this application accurately and completely. I have read the information on the back of this application, and I agree to attend all classes and complete the assigned workbook. I understand there is a \$45.00 nonrefundable fee per .5 credit for Service Learning.

Signature of Student _____ Date _____
Signature of Parent _____ Date _____