Reflection & Evaluation Club/Organization Service Project
Today's date:/ Date of service project:/ Time of service project:
Name and location of service project:
Club/Organization name:
Club/organization service project participants (attach additional sheet if necessary):
Please provide a brief description of how the service project went, and indicate if your goal was met:
How did your service project benefit the Delta College campus community?
What did your club/organization learn from this opportunity?
Do you feel this pursuit was a success for your club/organization? Why?
Recommendations for future service projects:
Service Project Contact Signature Advisor Signature
Note: Please turn in all paperwork for your group's service project to the Student & Civic Engagement office NO LATER THAN 7 days after your project's completion. Thank you for your cooperation.
SACE Staff Only:
Rec'd by: Filed/Scanned by:
Emailed request: Coordinator of Campus Life Signature: Date: