

Business Ethics Service Learning Program Time Log

This form is provided to assist you in tracking the number of hours you serve at your placement site, which should be a *single* organization.

Service Site: _____

Date:	Activities:	Time In:	Time Out:	Total Time:

SAMPLE

Service Learner's Name: _____

Service Learner's Signature: _____ Date: _____

Supervisor's Name: _____ Supervisor's Phone #: _____

Supervisor's Signature: _____ Date: _____

Business Ethics Service Learning Program

Final Reflection

Name _____ Date _____

Instructor _____ Section _____

1. Where did you complete your service? Who are the clients?

2. What work did you do personally? Was it meaningful? Why or why not?

3. What difference is this agency (organization, school, church) making in the community?

4. If you were in charge of the service organization, what would you do to improve it?

5. How did your service link to topics discussed in the corresponding class?
