

Mater Lakes Academy

A Miami-Dade County Public Charter School 17300 NW 87th Avenue, Miami, FL 33015 Phone: (305)698-8000 * Fax: (305)698-1800

"Home of the Bears'

Rene Rovirosa Principal Marjorie Enriquez Vice Principal Alice Martinez Assistant Principal

Community Service Hours Project Contract:

1	(student's na	me) and udies teacher and Mrs. Adriana Toro,	(parent's nam <mark>e</mark>)
confirm and acknowledge re needed to complete my Col		udies teacher and Mrs. Adriana Toro,	all information
		quired for graduation in Mater Lakes Ad ny clearance for graduation.	cademy and failure
Name of the student (prin	t name):	Signature:	
MDCPS Id number:			
Parent's name:		Parent's Signature:	
	Social Studies Teacher:		
	Period:		
	Date:		

I.D.#_____



Mater Lakes Academy Community Service Project Proposal

Student's Name	I.D.#
School	Project Starting Date
Grade Level Title of Project	
Directions:	
as needed.2. Have the Proposal form signed by a pare3. Submit the Proposal for approval and signed	ign it. Print clearly or type. Attach additional page(s), ent or guardian. gnature. (Seniors submit the form for approval to their ther students submit the form to the appropriate
Project Description- What is your project? B	e specific about what you will do.
Need- Why is this project needed? For whom states the states of the stat	
rinal Results- What do you hope to accompli	sir as result or your work:
I have reviewed my son/daughter's Community Ser	vice Project Proposal and understand that a community
service project must be completed in order to meet Schools.	t the graduation requirements for Miami-Dade County Publi
Parent/Guardian's Signature	
Student's Signature	
Signature of Approving School Official	

Project Summary Report

Student's Name	I.D.#
School	
Title of Project	
Grade Level When Project was Completed	Project Completion Date
duplicated copy be made of the essay.) 4. Have the completed Summary Report review 5. Submit the Summary Report and attached	utlined below on your own paper. Report form. (It is strongly suggested that a red and signed by a parent/guardian. essay for final approval and signature. (Seniors rement or economics teacher. All other students
 made from your original proposal. B. Briefly outline the steps you took to plan, in much time you spent in completing all aspect. C. Describe the problems that occurred during handled. D. Describe the impact you believe your projectived your service. 	activities of your project. Describe changes you applement, and complete the project. Indicate how its of this project. g the project. Explain how these problems were ect had on the community or on the people who imunity as you worked on your project. Describe
I have received my son/daughter's Project Summar service project must be completed in order to meet County Public Schools.	
Parent/guardian's Signature	
Student's Signature	
Signature of Approving School Official	

Mater Lakes Volunteer Hours



Nai	me of Studen	t:		AUFECTION STATE
ID#	#:			
Gra	ide Level:			
Pla	ce Volunteer	Work was initi	iated:	
Nai	me of Sponso	r or Director:		
Cor	ntact Phone:			
Titl	e of Project:			
Sig	nature of Per	son Responsib	ole for Volunteer:	_
you	1.50	unteer. # of	with the hours you have volunteered. At the completion of the work done during this	
		Hours	session	

DATE	# of	Description of the work done during this	INITIALS
	Hours	session	

Total Number of Hours:			

All students must use the Activity Log form to record their community service activities. You may add Volunteer Hours forms as needed. All hours must be documented,