# STUDENT PARTNERSHIP

| | Weekly Hours | Student Signature | Mentor Signature |
|---|---|---|---|
| Week 1 | | | |
| Week 2 | | | |
| Week 3 | | | |
| Week 4 | | | |
| Week 5 | | | |
| Week 6 | | | |
| Week 7 | | | |
| *Week 8 | | | |
| Week 9 | | | |
| Week 10 | | | |
| Week 11 | | | |
| Week 12 | | | |
| Week 13 | | | |
| Week 14 | | | |
| Week 15 | | | |
| Week 16 | | | |

**Total Hours:_____**

***Week 8/progress check:_____**

**Counselor Signature**

# Credit:

## .5 credit will be earned with a pass/fail grade

# Eligibility:

## 1. Must be a senior on track to graduate

## 2. One Student Partnership per semester

# Requirement:

## 1. Time Sheet

- Students should average 3 hours a week; minimum of 48 hours
- Turn in time sheet week 8 for counselor to review & signature

## 2. Reflection Paper

- This paper will allow you to express what you have learned and how you feel about the time you spent during your partnership. Please use at least 2 examples of activities, incidents, and/or programs that occurred while you were there. (Examples can be of times you worked with whole groups, individuals, moments that personally affected you, etc)
- Paper should be 1-2 pages in length, double spaced; font 12, your name and counselors name should be on the top

**Turn in paper with completed Time Sheet week of finals**

# STUDENT PARTNERSHIP

**Student Name:_____ Student ID#_____**

**Student Grade:_____ Assigned Counselor:_____**

**Student Email:_____**

**Student Cell Phone:_____**

**Partnership Location:_____**

**Partnership Mentor:_____**

**Mentor Email:_____ Mentor Signature:_____**

**Mentor Phone Number:_____**

**Students will earn a P (pass) or F (fail) for Student Partnership. In order to pass, students must be assigned a mentor and complete a minimum of 48 hours of service along with turning in the Time sheet and reflection paper at the end of the course during scheduled finals week.**

**I give permission for my son/daughter to be released from Bradford during the school day to attend Student Partnership at the above location and working with mentor above.**

**Semester 1: 1 2 3 4 5 6 7**

**Semester 2: 1 2 3 4 5 6 7**

**Parent /Guardian Signature_____ Date_____**
**Parent /Guardian Email_____**
**Parent / Guardian phone_____**