Name: Period:

**Do Good Project**

**“Be the change you want to see in the world” Ghandi**

The objective of this project is to bring awareness to the needs of others. This project will give you an opportunity to work with community members who are in need of your skills and services or a personal growth project as an alternative.

# **Guidelines & Grade Sheet**

The important thing is that you do something that you can be passionate about. You may work alone or with a friend.

You will work a minimum of **10** hours – you can do more hours, but not less.

On this project you will be graded as follows:

1. Pre-Approval Paper \_\_\_\_\_ 10 points Due \_\_\_\_

2. Verification of Progress form \_\_\_\_\_ 20 points Due \_\_\_\_

3. Verification-of-Work Completed form \_\_\_\_\_ 20 points Due \_\_\_\_

4. Presentation Visual \_\_\_\_\_ 20 points Due \_\_\_\_

5. Class Presentation \_\_\_\_\_ 20 points Due \_\_\_\_

6. Project Self-Evaluation Paper \_\_\_\_\_ 40 points Due \_\_\_\_

Total Possible Points: /130

**\*This sheet must be attached to each part of this project**

**Instructions for the Pre-Approval Paper**

Must be **typed in QUESTION AND ANSWER FORMAT**

Use complete sentences and punctuation.

1) What do you plan to do for your “do good” project? Will you work alone or with someone else? What do you think you will be doing when there?

*I intend to …*

*2)* Why did you choose this place to volunteer? What appeals to you about the location/organization?

*I choose to volunteer at \_\_\_\_\_\_\_\_\_\_\_\_ because….*

3) What is the name of the person that will supervise your work? What is the phone number or email of your supervisor?

4) THE PRE-APPROVAL PAPER MUST BE SIGNED BY A PARENT/GUARDIAN.

*Include a signature line at the bottom of the page.*

**As an alternative to the Do Good Project,** you may consider one of the following options:

Participating in a cessation program for alcohol, tobacco or other substances, an eating disorder program or other type of therapy. Attend 10 meetings that are hour long or the equivalent. After completing the 10 hours, you will write an evaluation of your experience or keep a reflective journal. The alternative project will need to be cleared by your Human Interaction teacher and your parent/guardian. This will **not** be shared with the class unless you choose to do so.

**Name:**  **Period:**

**Verification of Progress**

(This form should be filled out first)

The student who is **Doing Good** for you has been asked to meet the following conditions for this project:

· The project requires a minimum of **ten** hours of work. This is form is to verify hours are in the process of being completed.

To date, above named student has completed \_\_\_\_\_\_\_\_\_\_\_\_ hours of volunteer service

at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name of organization/volunteering location).

1. Supervisor Signature: Date:

2. Parent Signature: Date:

3. Student Signature: Date:

\*NOTE: When the hours of service have been fully completed, you will sign the back of this form and write a short evaluation of what they did to help you with their volunteer service. When they are finished Doing Good, they must write about it and present to the class in any creative way showing what they did, where and for whom.

\*\*If you have not completed any hours at the time this is due, you need to have a parent sign and explain below why you have not started your hours. This must be turned in on the due date whether or not your have started your hours.

This section is for parents or supervisor to fill out if you have **NOT** started any hours:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name:**  **Period:**

**Verification of Work Completed**

(This form should be filled out when 10 hours have been completed.)

Briefly describe the GOOD they did for you (to be filled out by your supervisor):

Total Hours Worked: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Signature of the supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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*If you volunteered at more than one place, please use space below for an additional location.*

Briefly describe the GOOD they did for you (to be filled out by your supervisor):

Total Hours Worked: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Signature of the supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Instructions for Project Presentation**

**Part I**

· Presentations are to have a visual component.

· There is flexibility in the shape/form of the visual.

· It may be poster, PowerPoint, 3-dimensional creation,

or other unique idea.

· The visual is to show where you completed your 10 hours,

something about the organization(s), the types of jobs you did

for the organization, examples of you completing the doing the

work, etc.

**Part II**

· Presentation should **explain** to the class what you choose to do

for your 10 hours, why you chose your locations, what you did,

how you felt about the jobs you did, etc.

· Include stories, examples or unique experiences you had while

volunteering.

· You will also be asked the questions from the Self Evaluation.

Project Brainstorm

advertisement diagram photo essay

banner diorama play

book game poster

brochure handbook scrapbook

bulletin board journal sculpture

chart mobile shadow box

collage model story board

costume newspaper video/imovie/powerpoint

dance pamphlet

**Project Self-Evaluation**

: Two pages – **Must be in question/answer format**

: Typed, Twelve font

: Double Spaced & 1” margins

**For the regular Do Good Project answer the following questions in the order they appear below. These must be answered in question/answer format for full credit! Give examples and specifics. If you ‘liked it because it was fun’ … what do you mean? Give examples of what was fun.**

: What I liked about the Do Good project?

: What was the most challenging aspect about the Do Good project?

: What I learned from this experience (about yourself, skills, people, etc.)?

: What I would do differently if I did this project again?

: Would you consider volunteering at this location again or another location?

Why/Why not?

: Has this project reinforced or changed your opinion on volunteering?

For **ALTERNATIVE Do Good Projects** (counseling, therapy, Alateen meetings, eating disorder groups, etc) please answer the following questions.

: What I liked the most about the Alternative Do Good project?

: What was the most challenging aspect about the Alternative Do Good project?

: What I learned from the meetings, sessions, or other forum?

: What I would do differently if I did the project again?

: How has your heart changed as a result of doing these hours?

: Will you continue participating in the program or therapy? Why or why not?

**Your grading sheet must be stapled to the top of your evaluation when turned in.**