**Please submit this report by mail or** [**website**](http://www.stemlibrarylab.org/slp) **no later than May 5, 2023.**

*STEM Library Lab Service Learning Program*

## *3011 N. I-10 Service Road East, Metairie, LA 70002*

# 2022-2023 Expenditure, Reflection, and Evaluation Report

**Title of Service Learning Plan:**

**Amount Received:** $

**Amount Spent:** $

**Name of School**:

School Address:

City/State/Zip:

School Phone Number:       Extension:

**Expenditure Report Preparer Name(s) and Title(s)**:

Preparer’s Email Address:

Summer Email Address:

Summer Phone#:

**Service Partner Organization(s):**

**Contact at partner site:**

Email Address:

Phone number:

**Impact Numbers**

Number of students that participated:

Number of individuals that were impacted:

Number of times students met with the Service Partner:

Approximate number of days OR classes spent on Service Learning Plan (in total):

Amount of money/food/supplies raised/grown (if applicable):

Amount of money of supplies donated by students/school (if applicable):

Spent all Awarded Money? ☐ Yes OR ☐ No

Is Check Attached? ☐ Yes OR ☐ No

If you are returning money,

did you complete a changes form? ☐ Yes OR ☐ No

If NO to all, please explain why money is owed but not being returned:

**REFLECTION AND EVALUATION**

**Service Learning Plan Steps Evaluation**

1. How did you teach your students about the problem being addressed and about the service partner? *(Please provide at least 1 student reflection showing what they learned)*
	*
2. What challenges did the teacher and students face to plan the service action?
	*
3. Describe what you did for your service Action. How effective was your service action? *(Please provide pictures and/or reflections about the action)*
	*
4. What Reflection and Evaluation techniques did you use? How did your service action benefit from them? *(Please attach sample evaluations, reflections, or surveys)*
	*
5. Describe what your students did to demonstrate their knowledge to the community? *(Please provide some evidence of demonstration)*
	*

**Curriculum Evaluation**

1. How did you teach your students about service learning?
	*
2. How did the service Action improve your classroom curriculum?
	*
3. What responsibility did your students take during the plan?
	*

**Impact and Goal Assessment**

1. When you and your students began, what end goal(s) did you have in mind? How well did you meet the goal(s)?
	*

**Future Plans**

1. What did not go as planned? What would you change from this past year?
	*

**Attachments and Evidence**

1. Student written samples of pre-reflections, rubrics, student reflections, newspaper/web articles, and completed evaluation forms. Please do not send all of your student examples, only one or two students work are necessary.
2. Photographs/Videos/Social Media – Attach links to any photos or videos. If you are providing physical photos, please reduce in size and paste in a document with a small descriptive caption.

**Please list what you are attaching from items:**

1.
2.

**Comments?**

**REPORT OF ACTUAL EXPENSES**

Using your approved application budget as a guideline, list the actual cost of each approved item.

**LIST ITEM/NUMBER BOUGHT/COST PER ITEM = TOTAL ACTUAL COST OF ITEM:***Note: To add line items to this report of expenses, beyond the last row, use the TAB key*

|  |  |  |  |
| --- | --- | --- | --- |
| ITEMS/PURPOSE | NUMBER OF ITEMS | COST PER ITEM | TOTAL COST OF ITEM |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| **Amount funded**  | **$** |
| **Total Amt Spent** | * **$**
 |
| *Equals* | **$** |

**If funds remain, please submit a check with a Changes Form explaining why funds were not spent:**

***In accordance with the Award Acceptance Agreement Form any unused portion of the award must be returned to the above address.***

**Verification and Approval Statement**

I have reviewed the service learning expenditure report. To the best of my knowledge, the service learning plan was completed as described on this report. The budget is correct and either all money was used OR any unspent funds were returned to the Joe W. and Dorothy Dorsett Brown Foundation.

Principal’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal’s Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_