Service Learning Questionnaire

Student name: ____________________                             Overall feelings: 1 2 3 4 5
AAT Course: _________________                            (1 very challenging-5 very supportive)
Instructor: ____________________
School: _____________________
Cooperating Teacher: _________

How did you contact the school? What was the follow-up process?

General observations:

Most positive:

Most negative:
In what way did you provide service?

What parts of your assignment/service did you find most beneficial?

Your favorite “A-ha!” moment?

What did you learn through this experience that you did not know before?

Was the service learning process clear?