



# SERVICE TO CHILDREN PROJECT PROPOSAL

**Due: October 31, 2018**

Mail completed forms to **P.O. Box 581254, Minneapolis, MN 55458** to receive a spring payment. Do not submit letter through fax or email. All Service to Children (STC) Projects must be reviewed and approved by the Page Education Foundation's Administrative Director. Page Scholars who change or add additional volunteer sites must submit a new Service to Children Project Proposal notifying the Foundation of the change. Print clearly. Do not leave blanks. Late forms will not be accepted. **Page 2 of this form must be completed and signed by a volunteer supervisor.**

**Please review the Service to Children Project requirements before proceeding:**

- 1.) STC Projects must serve children in grades K-8<sup>th</sup>. No volunteer service projects with preschool, high school, college or adult students will be approved.
- 2.) Volunteer roles and responsibilities within the STC Project must be direct work tutoring and mentoring children. No administrative work, babysitting, religious studies, sports & coaching, security and supervising, will be approved.
- 3.) Projects must be performed in Minnesota with exception to University of Notre Dame Page Scholars.
- 4.) Projects must be academic (i.e. tutoring in core subjects, such as math, language arts, science, homework help).
- 5.) All volunteer projects and hours must be completed by May 1, 2019 if a Page Scholar is going to reapply for another year of funding.
- 6.) Page Scholars cannot perform service projects with family members or children in their same household (i.e. tutoring little brother) nor may they be supervised by a family member. STC Projects must take place within legitimate organizations (i.e. Boys and Girls Club, Elementary Schools, etc.)

## PAGE SCHOLAR INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	( <input type="text"/> ) <input type="text"/> -- <input type="text"/>
<b>Date of Birth (Month/Day/Year)</b>	<b>Primary Email Address</b>	<b>Primary Phone Number</b>

<b>CIRCLE THE ANSWER THAT BEST REFLECTS YOUR BELIEF.</b>	<b>Strongly Disagree</b>	<b>Neither Agree nor Disagree</b>	<b>Strongly Agree</b>
I am a leader at my school/on my campus.	1	2	3
I am a leader in my community.	1	2	3
I am a role model to my peers.	1	2	3
I am a role model in my community.	1	2	3
I can positively influence a child's attitude about education.	1	2	3
I can positively influence a child's belief about his/her ability to learn.	1	2	3
When I make plans, I am almost certain that I can make them work.	1	2	3
I believe that my grades are impacted by the number of study hours I put in.	1	2	3

## SERVICE TO CHILDREN PROJECT INFORMATION

**Name of Minnesota Organization** *Example: YMCA*

**Name of Program within Organization** *Example: Y-READS!*

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="U.S.A."/>
<b>Organization's Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Country</b>

<input type="text"/>	( <input type="text"/> ) <input type="text"/> - <input type="text"/>
<b>Organization's Website</b>	<b>General Phone Number</b>

Is your Service to Children Project through a work-study program? Yes  No  *If "No", skip this section.*

**Name of Work-Study Supervisor** **Supervisor's Phone Number**

<input type="text"/>	<b># of Work-Study Hours Per Week</b>	<input type="text"/>
<b>Email</b>		

From the list below, please select the best description of the organization:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Elementary School                   | <input type="checkbox"/> Library                    | <input type="checkbox"/> Social Service Program/Agency         |
| <input type="checkbox"/> Middle School                       | <input type="checkbox"/> Community Center           | <input type="checkbox"/> Childcare Center                      |
| <input type="checkbox"/> College/University Outreach Program | <input type="checkbox"/> Hospital/Healthcare System | <input type="checkbox"/> Other, please specify below:<br>_____ |
| <input type="checkbox"/> Non-Profit Organization             | <input type="checkbox"/> Faith-Based Affiliation    |  |

In what academic subject(s) will this Page Scholar support? *Select all that apply.*

- |                                  |   |                                  |  |
|----------------------------------|---|----------------------------------|--|
| <input type="checkbox"/> Math    | <input type="checkbox"/> Reading        | <input type="checkbox"/> Writing | <input type="checkbox"/> Other, please specify below:<br>_____ |
| <input type="checkbox"/> Science | <input type="checkbox"/> Social Studies |                                  |  |

## VOLUNTEER SUPERVISOR'S CONTACT INFORMATION

**IMPORTANT:** This section requires a volunteer coordinator OR site supervisor's signature. This form will not be accepted without a signature.

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Volunteer Coordinator or Site Supervisor's Full Name

Position/Title within Organization

(  )  -

Supervisor's Work E-Mail Address

Direct Phone Number

Ext.

Age group of children Page Scholar will be serving: *Select all that apply.*

- |  |  |  |  |  |
|--|--|--|--|--|
| <input type="checkbox"/> Kindergarten          | <input type="checkbox"/> 1 <sup>st</sup> Grade | <input type="checkbox"/> 2 <sup>nd</sup> Grade | <input type="checkbox"/> 3 <sup>rd</sup> Grade | <input type="checkbox"/> 4 <sup>th</sup> Grade |
| <input type="checkbox"/> 5 <sup>th</sup> Grade | <input type="checkbox"/> 6 <sup>th</sup> Grade | <input type="checkbox"/> 7 <sup>th</sup> Grade | <input type="checkbox"/> 8 <sup>th</sup> Grade |  |

Planned Start Date  /  /   
Month Day Year

Planned End Date  /  /   
Month Day Year

**IMPORTANT:** All 50 hours of volunteer service must start after June 1, 2018 and be completed by May 1, 2019 (48 weeks) for Page Scholars to be eligible to reapply for the Page Education Foundation's scholarship the following year.

Page Scholar's Volunteer Schedule: (Please fill in volunteer's weekly schedule. See example.)

	Example	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning Hours								
Afternoon Hours	12-2 p.m.							
Evening Hours								

Total volunteer hours to be completed weekly: #

By signing below, you agree to supervise the Page Scholar at your volunteer site and will document and provide proof of 50 hours of volunteer service completed for the 2018-2019 school year to the Page Education Foundation by May 1, 2019.

Signature of Volunteer Coordinator/Site Supervisor

Date

## DESCRIBE YOUR SERVICE TO CHILDREN PROJECT

Briefly describe how your Service to Children Project is primarily academic in focus? (Example: I will be tutoring children in 3<sup>rd</sup> grade by helping them with their reading. We will focus on vocabulary and memorizing sight words.)

By signing below, you agree that all the information provided is true to the best of your knowledge. If you have additional questions, please contact the Page Education Foundation's Service to Children Program and Outreach Coordinator, Cha Billy Vang at 612-332-0406 or [chabilly@page-ed.org](mailto:chabilly@page-ed.org).

Page Scholar's Signature

Date