SOAR MILES Blue

CHECKPOINT FORM

Date	Type of Miles (Please Circle)				# of Miles (Hours)	Description of Activity/Notes	Signature (Supervisor signature for community service miles only)
8-27-08	(A)	S	C	E	*3*	*We read Chapter 1 and looked over syllabus for History class.*	
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
Totals							

Total Miles this Month:

Coordinator Signature:

SOAR MILES Legend: A=Academic, S=Social, C=Community Service, E=Event

Your signature below indicated that you acknowledge that all representations made on this form are true and correct.

Mentee Signature: _____Date:_____

Mentor Signature: _____Date:_____

SOAR MILES Green

CHECKPOINT FORM

Date	Type of Miles (Please Circle)				# of Miles (Hours)	Description of Activity/Notes	Signature (Supervisor signature for community service miles only)
8-27-08	(A)	S	C	E	*1*	*We went over my Fall class schedule and talked about Grad. School*	
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
	A	S	C	E			
Totals							

Total Miles this Month:

Coordinator Signature:

SOAR MILES Legend: A=Academic, S=Social, C=Community Service, E=Event

Your signature below indicated that you acknowledge that all representations made on this form are true and correct.

Mentee Signature: _____Date:_____

Mentor Signature: _____Date:_____