

Community Service

Student must complete this form for each Community Service assignment.

Name: _____

Grade: _____ Graduation Year: _____

Home Phone: _____

Agency: _____

Supervisor: _____

Phone: _____

<u>Date</u>	<u>Job Description</u> Describe Activities Performed	<u>Hours</u>	<u>Supervisor's</u> <u>Initials</u>
TOTAL HOURS	<u>X</u>		

ALL SIGNATURE AND DATE FIELDS BELOW MUST BE COMPLETED.

_____ I agree that the above is an accurate description of the volunteer assignment.

Student's Signature

Supervisor's Signature

Date

Parent or Guardian: _____

Date: _____

Guidance Counselor: _____

Date: _____