

# Community Service



## Community Service Information Form

Name of Student	
Grade Level (circle one)	9      10      11      12
Student E-mail address	
Date(s) of Service (include year)	
Name and address of Group or Organization	
Contact Person (include phone or e-mail)	
Total Hours Volunteered	

If you have volunteered on multiple days, please include this information on the back of this sheet. Please record the date and the hours per day

PROVIDE A BRIEF EXPLANATION OF YOUR VOLUNTEER EXPERIENCE:

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VERIFICATION SIGNATURE  
OF ADULT ON-SITE COORDINATOR: \_\_\_\_\_