

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. Hours should be submitted within 30 days of completion.

PROVIDE A BRIEF EXPLANATION OF YOUR VOLUNTEER EXPERIENCE:

VERIFICATION SIGNATURE
OF ADULT ON-SITE COORDINATOR: _____