

Class of 2020
Community Service Completion Form

(15 required hours for freshmen year and 15 required hours for sophomore year)

Please fill out one form for each community service event or volunteer activity.

Date: _____

Student Name: _____

GRADE: _____

Name of Organization/Agency:

Name of Supervisor:

Address of Organization/Agency:

Phone Number of Organization/Agency:

E-mail of Organization/Agency Contact:

Brief Description of community service performed:

Number of Hours performed: _____

Signature of Supervisor: _____

Signature of Sponsor or Coach: _____