

Community Service Record Sheet

East Alton-Wood River Community High School District No. 14

Student's Name (please print): _____

Grade in School: Freshman Sophomore Junior Senior

Community Service Performed (brief description is required)

1. Date of Community Service _____

Start Time _____ Stop Time _____ Total Hours _____

2. Date of Community Service _____

Start Time _____ Stop Time _____ Total Hours _____

3. Date of Community Service _____

Start Time _____ Stop Time _____ Total Hours _____

Name of Supervisor of the Community Service event/activity (not a parent or relation)

Supervisor's Job Title _____

Supervisor's Signature _____

Supervisor's Phone Number _____

Supervisor's Email _____

RESPOND TO THE THREE QUESTIONS ON THE BACK.

If you have questions about the community service requirement, please contact **Mr. Beachum, Mrs. Catlin, Mr. Marshall, Ms. Scheffel, Mrs. Timmins, Mrs. Zipprich** or an administrator.

Place completed record form in the Community Service Box in the Main Office or Attendance Center.

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1. EXPLAIN the community service YOU provided. Be specific.

Minimum three sentences about the activities, responsibilities, and duties performed.

2. EXPLAIN something about the community that you learned from your service. *Minimum three complete sentences.*

3. HOW did YOUR participation benefit the community? *Minimum three complete sentences.*

----- Community Service Committee's Notes -----

Status	Date	Initials	Notes:
Approved	_____	_____	
Resubmit	_____	_____	
Denied	_____	_____	

Place completed form in the Community Service Box in either the Main Office or Attendance Center.