

**HHCA Upper School 2008-2009 School Year
Community Service Verification Form**

Student Name _____ Grade _____

Name of organization/group: _____

Total number of hours for this project: _____

Date(s) and hours (list specific times) worked: _____

Brief description of the type of service/project:

Verification of Service

Signature of contact person

Contact person's name printed

Phone or email address of contact person

Signature of Student

Student's Name Printed

HHCA Approval

Date Approved

Notes

- ❖ Each school year upper school students must complete 18 hours of community service. Of the 18 hours, 9 may be completed over the summer.
- ❖ It is the student's responsibility to locate an acceptable place of service, plan an appropriate service project, carry out the plan of community service, and follow up with approval form(s).
- ❖ Completed forms should be returned to Mr. Green's box, located on his office door.