

Community Service Project Form

Student Name _____ Graduation Year _____

Total Hours of Project _____ Project Date _____

Organization Name _____

Description of Project:

SIGNATURE OF ADULT IN CHARGE _____

(POSITION, IF APPLICABLE) _____

I have followed the community service guidelines that are included on the back of this form.

STUDENT SIGNATURE _____

PROCEDURE:

1. Fill out form properly.
2. Describe the job or jobs exactly that were done on project.
3. You must not receive payment for the project.
4. The project cannot be done for a family member.
5. The project must not be done during school hours.

Please turn in completed form to the GDS Upper School Office and keep a copy for your records.