Community Service Submission Form

Name: _____ Date: _____

Service Project Tile: _____

Date of Project: _____ Project Start Time: _____

End Time: _____

Total Hours: _____

Description of Service (concise and descriptive)

_____

_____

_____

_____

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_____

Project Coordinator Information:

Name: _____ Organization: _____

Phone: _____ E-mail: _____

I certify that all of the information on this form is correct to the best of my abilities. If any information is found to have been falsified all hours awarded will be forfeited and I may face disciplinary action.

Signature of Student: _____ Date: _____

Signature of Project Coordinator:_____ Date: _____