HAZELWOOD SCHOOL DISTRICT COMMUNITY SERVICE FORM

YOUR COMMUNITY SERVICE FORM MUST BE TURNED IN THE SAME SCHOOL YEAR THAT IT WAS COMPLETED

STUDENTS: Please complete the entire form. Incomplete forms with inaccurate dates, lack of signatures or dates of service will not be processed

ONE ACTIVITY PER TIME SHEET ONLY

Student Name: _____ Graduation Year: _____ Student ID#: _____
First Last

SERVICE INFORMATION

Name/Address of Organization: _____

_____

Phone: _____ Email: _____ Website: _____

Description of Service: _____

_____

Date(s) of Service: _____ Total Hours Completed: _____

Agency Supervisor Comments: _____

_____

Agency Supervisor Signature: _____ **Date :**_____(M/D/YY)

Student Signature: _____ **Parent Signature:** _____

Community Service Coordinator: _____ **Date:** _____(M/D/YY)

Guidelines

- **Must be completed outside of the student's normal day.**
- Volunteering at a non-profit agency, church or hospital (Vacation Bible Schools, mission trips, church picnics, church school/daycare)
- Volunteering at a day care center that is listed as a 501(c)3 organization by the IRS
- Volunteering to manage high school sports teams, and assisting in theater and musical productions.
- Creating a student led community service program.
- Must be unpaid.
- Must benefit the community or the school
- Must be completed in addition to class requirements.
- Can be completed for anyone outside of family members.
- Cannot be earned while a student is serving out-of-school suspension.

****Examples of unacceptable Community Service activities:**

- Volunteering at a for profit business
- Volunteering at a private or in-home daycare
- Volunteering for a political campaign or individual running for elective office.

Community service is a graduation requirement. 50 hours are required for graduation from the Hazelwood School District. Transfer students are required to complete twelve and one-half hours (12 ½) for each year of enrollment in the Hazelwood School District. Please consult the State of Missouri guidelines and the Hazelwood School District Guidelines for acceptable community service/service-learning activities.

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Please complete the date, time, activity and supervisor signature for the service performed.

Student Name: _____ Graduation Year:_____ Student ID# _____

DATE (M/D/YY)	START TIME	END TIME	HOURS	ACTIVITY	SUPERVISOR SIGNATURE (must be Legible)

TOTAL HOURS _____