



Community Service Form
2019-2020 School Year

SCHOOL: _____

STUDENT NAME: _____

GRADE LEVEL (circle One): **12** **11** **10**

COMMUNITY SERVICE ACTIVITY:

Organization	Hours Served	Approval Signature/Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL HOURS SERVED: _____

APPROVED BY: _____

DATE: _____

Guidelines

- Community service hours must be performed in your local community
- Family members cannot sign community service forms
- CTC/AVTS students cannot submit the same hours to both their CTC/AVTS and their sending school

VISIT OUR WEBSITE: WWW.TCPINC.ORG