

# Clearfield Alliance Christian School - Community Service

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Community Service Organization: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Please Print)

**PRIOR APPROVAL GRANTED BY:** \_\_\_\_\_ **ON:** \_\_\_\_\_

Instructions:

- Use separate log for each organization.
- Log must be turned in same semester as served.
- Summer hours must be submitted during the first week of school.
- Log must be complete including signatures - student and supervisor.
- This form is to be completed by the student.

Description of Service	Date	Hours
1. What service did you do?		
2. Describe a need or problem your service addresses.		
3. Describe the impact of your service on the community.		
	<b>Total Hours</b> ▼	

I have followed the CACS Community Service Guidelines and have not received money, done this job for a family member, or worked during school hours.

Organization Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CACS Administrator: \_\_\_\_\_ Date: \_\_\_\_\_