



GRANT HIGH SCHOOL



Community Service Agreement

Student name: _____

Current grade: _____ Date: _____

Graduation year: _____

Organization name: _____

Duties: _____

For each community service project you will need to fill out an additional Community Service Agreement form.

Grant Public Schools assumes no liability for health, safety, or welfare of students while meeting community service requirements or activities.

student signature

parent signature

Project supervisor printed name and signature

Your signature on this form will also verify that there was no payment or other type of compensation for this service.

CS Coordinator Signature date

Student name _____

Date	Time in	Time out	Supervisor initials	Total hours
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____

Community Service Coordinator,
Mrs. Jordan
(231) 834-5622 Ext. 409