Any planning, training, or performing of service that benefits the community and is sponsored by non-profit organizations can be counted towards community service credit.

Students will receive 0.5 elective credits after accruing 90 hours of verified service, up to three times during their high school career, for a total of 1.5 elective credits (270 hours of total service).

**THIS FORM MUST BE COMPLETED IN ORDER TO RECEIVE CREDIT**

Note: Keep copies of all volunteer paperwork for college, scholarship, and employment applications.

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Grad Year:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Dates of Service:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(include month & year)

**Organization / Event:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **# of Hours Completed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(timesheets are required for hours over 50)

**Supervisor Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Supervisor Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please describe the service tasks you completed:**

(i.e. cleaning, watching kids, tutoring, making posters, etc.)

**Student and Parent Agreement:** I understand that Edmonds School District #15 will have no responsibility

or liability for any claims which I may have arising from my participation i n Community Service. I have read

and understand the guidelines governing community service for high school credit.

**Student Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Parent Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_