

Kent City High School
Community Service Documentation Form

(Fill in completely or your hours will not be recorded)

Name: _____ Grade: _____

Date of project/service: _____ Total hours: _____

Sponsoring Organization: _____

Location of project/service: _____

Duties performed: _____

Project Supervisor: _____ Phone number: _____

Authorized Signature: _____

(Not a parents signature)

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