



Community Service Form

Please make sure to fill all the required fields. If you are completing a special service and it's not approved by Mrs. Giacchino your form can be declined.

Check the service hour guidelines if you have any questions.

Student Name:* _____ **Grade:*** _____

Name of Organization/teacher:* _____ **Is this service at MCA*** YES NO

Organization's Phone Number:* () - - **Name of supervisor:*** _____

This form must be turned in no later than 3 months after completing service.

Date/s of Service*:	Description of Service*:	Hours*
Total hours*		

Supervisor's Signature*

Student's Signature*

****For special service/projects please have Mrs. Giacchino approve before you do the service.**

Principal's signature*