

FOR OFFICE USE ONLY:

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Y.E.S.PROGRAM

Community Service Documentation Form



Please write neatly. Fill out form completely. Use Black Ink only. Every blank must have an appropriate answer or a signature.

NAME: _____

ID# (6 digit#) _____

Class of: _____

Grade Level _____

Date of Service performed (mm/dd/yy): _____

#of hours of service: _____

Name of Non-Profit Agency/
Recipient in need: _____

**Before signing this form, please verify that the name, date, and number of hours worked have all been filled in. If there are multiple dates, the student must attach a log with dates and number of hours worked on each date.*

*Non-Profit Agency/Recipient in need Signature: _____

Area Code/Phone Number of Agency/Recipient: _____

Street Address of Agency/Recipient: _____

City, State, Zip Code: _____

Email contact for Agency/Recipient: _____

Brief description of Community Service (what exactly did you do?)

Were you paid, rewarded or required to do this service? _____

Are you a member of the organization that benefitted from the service? SIGNATURE OF STUDENT: _____

SIGNATURE OF PARENT/GUARDIAN: _____

I understand that to fulfill the requirements for community service and to receive the Y.E.S. medal, I must complete the required hours before April 1st of my senior year. I further understand that I must submit documentation to the Y.E.S. program sponsor. Information to receive hours can be found on the Y.E.S. web site or I may inquire volunteer hours myself.