

Your Graduation Year: _____ Last Name, First Name _____



North Thurston Public Schools Community Involvement Documentation Form

The purpose of the Community Involvement graduation requirement is to gain skills, make connections with community members, and learn from activities outside of the classroom. Hours should prepare students for their futures after high school or benefit our community in some way. Please review this form and the reflection questions on the back before starting to ensure your plans meet the requirement.

Community Involvement hours are defined as time that you have volunteered (non-paid, with a business or organization), job shadowed, worked with a mentor on a career or personal interest, or participated in a community or school service project. Community Involvement can be defined as volunteering with an organization in an activity that benefits the community, participating in a school service project, or exploring a career of interest, but not an activity for personal, individual gain. Hours worked for family members or required by a school class or club, the courts, or any other institutions due to discipline or restitution may **not** be applied. **In most cases, babysitting, yardwork, housework or the like for a family member or friend are not considered community involvement.** The community contact person must be an adult, which is defined as being age 21 or older, and not a family member.

Community Involvement hours must be documented in the space provided below. Please list the organization, date(s), hours, contact person and their signature for each experience. You may include as many Community Involvement hours as you have earned with this contact person. In addition, you must answer the reflection questions on page 2. **You must have at least 20 hours to complete the Community Involvement requirement of your High School & Beyond Plan.** You may begin to acquire hours beginning at the end of your 8th grade year. Once complete, give this form to the person designated by your high school. **Take a photo of this form and save it for your records!**

To be completed by student

(Type in this form or print clearly)

Student Name (first and last): _____ Advisor: _____

Your Graduation Year: _____ School: _____

Organization: _____ Contact Person at Organization: _____

Organization Contact Person Phone Number: _____ Organization Contact Person Email: _____

Dates of Community Involvement: _____

Type of Community Involvement

- School service project connected to club or school activity
- Job shadow/career exploration/work with a mentor (not your parent)
- Volunteer with business or community organization as community service

To be completed by contact person

Promptness	Good	Fair	Below Average	Poor
Completion of task(s)	Good	Fair	Below Average	Poor
Quality of work/effort	Good	Fair	Below Average	Poor
Demonstrated self-initiative and independence	Good	Fair	Below Average	Poor

Comments (optional): _____

Hours of Service: _____

Signatures below indicate that all information contained in this document is factually and honestly presented.

Student Signature

Contact Person Signature

Please attach business card, if possible

Students, PLEASE COMPLETE THE OTHER SIDE OF THIS FORM - TAKE A PHOTO AND KEEP A COPY FOR YOUR RECORDS

