

Brookville High School

2024-2025 Community Service Record Sheet

(Use a separate sheet for each different agency.)

Class of 2025 = 20 hours
 Class of 2026 = 20 hours
 Class of 2027 = 10 hours
 Class of 2028 = 10 hours

STUDENT: _____ GRADE: _____

AGENCY: _____

DATE	START TIME	TASK	END TIME	TOTAL TIME SERVED	SERVICE SITE SUPERVISOR'S NAME & TITLE	SUPERVISOR'S INITIALS	SERVICE SITE SUPERVISOR'S PHONE NUMBER
			TOTAL				

I attest that I have completed the work as recorded above in agreement with the Supervisor.

Student Signature: _____ **Date:** _____

I attest that the above named student successfully completed the volunteer service as documented above.

Supervisor's Signature: _____ **Date:** _____

(Parent/Guardian may not sign as the supervisor.)

*Students are highly encouraged to turn in all community service project verification sheets no later than one week after the completion of any service project(s).
 **Students, please enter all hours completed. Not just the minimum.

**Brookville High School
Community Service Experience Summary
2024-2025**

STUDENT NAME: _____ GRADE: _____

AGENCY NAME: _____ PHONE: () _____ - _____

SUPERVISOR'S NAME: _____ HOURS SERVED: _____

(Please provide a summary for each different agency.)

1. List and describe duties that you performed or new skills you learned.

- _____
- _____
- _____

2. Describe ways this experience changed the way you see things.

- _____
- _____
- _____

3. Describe a specific incident in which you had an impact on someone else.

4. Would you recommend this agency to other students? Yes No Explain why or why not.

Please keep a copy of this form for your records.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____