Colton Joint Unified School District

Community Service Student Application

GRAND TERRACE HIGH SCHOOL

Must be submitted to Mrs. Bautista in E501 before start of service

First Name: _____ Last Name: _____ Student ID#: _____

Expected Graduation Year: _____ Counselor: _____

Date application submitted: ___/___/___ (Please make a copy for your records)

Please choose one of the following options:

_____I have previously received my Varsity Letter in Community Service

_____I have previously received my Varsity Letter for a different activity

_____I have never received my High School's Varsity Letter for any activity

Where service hours will be completed and name of immediate supervisor and contact number:

Name of organization: _____
(must be pre-approved if organization is not non-profit)

Address of organization: _____
(street address)

_____ _____ _____
(City) (State) (Zip Code)

Name of Supervisor: _____ Contact Number: ( ) _____

For office use only