SHORELINE PUBLIC SCHOOLS

Fill out and submit via the Google Survey in your *Class of 202x* course in Canvas.
Use a new form for: each nonprofit organization and/ or each new submission of hours.

Shorewood High School 2025-2026 Community Service Verification & Consent Form

Student Name _____

Graduation Year _____

IF YOU ARE IN NATIONAL HONOR SOCIETY, upload your form to your Class of 202x course AND to the NHS course.

1. Student Information & Parent/ Guardian Consent

Student Name _____

Student School Email _____

Parent Name _____

Parent/ Guardian Informed Consent must be completed prior to service

Being fully informed and aware of the risks associated with this activity, I hereby give my permission for my student, _____ to participate in this activity. I release the Shoreline School District and assume any risk inherent in this activity. In addition, I waive the right of recovery or to bring legal action against the Shoreline School District for any injury, death, property damage, or other consequences arising out of participation or during the period of activity. NOTE: The district does not require or endorse the actual physical activity the student undergoes to prepare for this project.

Parent/ Legal Guardian Signature _____ **Date** _____

Parent/ Legal Guardian signature reflects knowledge and approval of the activities listed.

2. Nonprofit Organization Information *use a new form for each nonprofit organization*

Name of Nonprofit _____ **Nonprofit Location** _____

Supervisor Name _____ **Supervisor Title** _____

Supervisor Email _____ **Supervisor Phone** _____

3. Log of Services Rendered

Date	Hours	Description of Service Rendered	Supervisor Signature
TOTAL THIS SIDE			
TOTAL BOTH SIDES			

4. Student Signature

By signing, I certify that I have provided the services listed above.

Student Signature _____ **Date** _____

Upload the this from using the Google Survey; the link can be found in the Community Service Assignment of your Canvas Course.

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5. Log of Services Rendered, continued

Note: If you are doing ongoing service, please start a new form after submitting one, even if you did not fill all lines.

Date	Hours	Description of Service Rendered	Supervisor Signature
TOTAL THIS SIDE			
TOTAL BOTH SIDES			