



# Community Service Form

(TURN INTO FRONT OFFICE)

Student Name: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Volunteer - Name of Organization : \_\_\_\_\_

Organization Phone #: \_\_\_\_\_

Organization Address: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Supervisor Email: \_\_\_\_\_

Dates and hours served (xx/xx/xxxx): \_\_\_\_\_

\_\_\_\_\_

Total Hours: \_\_\_\_\_

Description of community service event and how you assisted: \_\_\_\_\_

\_\_\_\_\_

*Supervisor's Agreement: I verify that the above Oceanside student has successfully completed the Community Service as stated above.*

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OCA Community Service Coordinator: \_\_\_\_\_ Date received: \_\_\_\_\_