Curtis Baptist School Community Service

Student's Name:		Date:
		Graduation year
DESCRIB	<u>E:</u>	
1.	Name of organization/service provider:	
2.	City where organization is located and phone numbe	r of this organization:
3.	Type of work done:	
5.	How many hours did you work? What date(s) did you work? How rewarding was this work for you?	
U.	Tiow rewarding was tins work for you:	
	Would you recommend this type of service to others? Why?	Yes No
<u>VERIFICA</u>	<u>.TION</u>	
Person wh	no organized, supervised or benefited from your work	and can verify your work:
		Phone Number:
Parent or	Guardian:	Phone Number:
DATE REC	CEIVED: Total hours of comm	unity service: