



COMMUNITY SERVICE REQUEST FORM

INSTRUCTIONS

Complete this form and have it approved by the community service coordinator prior to earning hours with an organization.

STUDENT INFORMATION

Student's Name _____

Grade _____

E-mail _____

Parent/Guardian Name _____

Service Activities to be done include _____

Dates of service _____

Student Signature _____ Date _____

Parent/Guardian _____ Date _____

NONPROFIT, TAX-EXEMPT ORGANIZATION INFORMATION AND AGREEMENT

To be completed by the supervisor

Organization Name _____

Federal Employer Identification # _____

Address _____

Secular activities to be performed by the student include: _____

Name of supervisor _____

Title or position _____

E-mail _____

Daytime Phone _____

Date _____ Signature of supervisor _____

APPLICATION REVIEW BY COMMUNITY SERVICE COORDINATOR

Approved _____ Disapproved _____

Explain: _____

Date _____ Signature _____



ROCHAMBEAU

THE FRENCH INTERNATIONAL SCHOOL