

NOTE: *This form is to use for graduation requirement ONLY.*

BELLEVUE SCHOOL DISTRICT
HIGH SCHOOL COMMUNITY SERVICE
Graduation requirement: 40 hours

STUDENT INFORMATION:

Name _____ Year of Graduation _____
School _____ Student ID #: _____
Counselor _____ Home Phone: _____
Address _____

COMMUNITY SERVICE PLAN:

Agency/Organization _____
Address _____
Contact Person _____ Title _____
Phone _____ Total **PLANNED** Hours _____
Dates of **PLANNED** Service: From _____ To _____

Please briefly describe the nature of the service planned:

SIGNATURES: PRE-APPROVAL/SUPPORT (Student, Parent, School, Agency):

Student Signature _____
Parent Support/Approval Signature _____
Principal (or designee) Support/Approval Signature _____
Agency Support/Approval Signature _____

CONFIRMATION OF HOURS OF SERVICE (To be filled in when service is completed):

Agency Contact Signature _____
Number of Hours Completed _____
Comments: _____
