

Community Service Form

Monterey Bay Academy



Monterey Bay Academy

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Student's Name _____

Grade 9 10 11 12

Date(s) of Activity _____

Time Involved with Activity _____
Hours / Minutes

Description of Activity

What was the activity? _____

What was your job or part? _____

Was this activity of benefit to you? Yes No

Why or Why not? _____

How was this activity of benefit to others? _____

Student Signature

My signature indicates that I did the above services as described without receiving pay or Work Experience Credit.

Date of Signature

To the Supervisor

Thank you for your help in this project! Please read and sign below.

I attest that the above service was:

1. Personally supervised.
2. Voluntary with no payment or grade received by the student.
3. Not done for the student's immediate family.
4. Performed in the indicated number of hours.

Please note that the student's parents may not sign this form.

Supervisor Printed Name

Supervisors Phone# (_____) _____ - _____

Supervisor Signature

Date of Signature