

University Academy Community Service Program

All information is to be filled out by the student. Form is invalid without site supervisor's signature.

Hours are invalid if done for pay or if site supervisor is direct relation to the student.

Service must be for a non-profit organization unless pre-approved.

Return completed form to Joshua Burdette, Room A103, 816.412.5900, burdettej@universityacademy.org

Student's Name: _____

Grade: _____

Dates Volunteered: _____

Hours Completed: _____

Agency/organization: _____

Nature of the work performed: _____

Supervisor: _____

Supervisor's phone: _____

Supervisor's signature: _____

Comments: _____

Student's Reaction/Feedback or other important information:

FOR OFFICE USE:

Date Logged: _____ by _____