

STUDENT NAME: _____ **HOMEROOM TEACHER NAME:** _____

**CHRISTIAN COMMUNITY SERVICE EXPERIENCE
LEARNING TO SERVE – SERVING TO LEARN**

Given below is the outline of my service work proposal. I understand that I must obtain the agreement of my parent/guardian if I am under 18. I understand if the proposed activity is not one approved by the Dufferin – Peel CDSB, I must obtain approval from the principal prior to commencement of the activity. I further understand that my service responsibility includes reflection on the people and events encountered, my feelings about the service and what I have learned.

Name & Location of Sponsoring Agency

Description of my contribution to the community through this activity

Estimated Number of Hours _____
Signature of Principal (if required) _____

Signature of Student _____ Signature of Parent _____

.....
This is to certify that _____ has completed _____ hours of the community service experience outlined above.

Date Completed _____ Service Supervisor (name & phone number) _____

.....
This is to certify that _____ hours of Christian Community Service have been recorded in the student's school file.

Signature of School Official _____ Date Entered _____

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Students must complete 40 hours of recorded community service as a graduation requirement.