

PRIOR APPROVAL
HOLMAN MIDDLE SCHOOL
COMMUNITY SERVICE APPLICATION

NAME _____

SOCIAL STUDIES HOUR _____

This year you will be arranging your own site for 10 Hours of Community Service. Your site SHOULD be approved by your Social Studies teacher BEFORE you begin. The service must be done for persons outside your own family and not done during regular school hours. Also, you may NOT receive money for the work. Please indicate below where you plan to complete your hours and return this form to your Social Studies teacher. Any hours over 10 can be used for the end of the year awards program.

Name of Organization _____

Phone Number of Organization _____

Name of Contact Person _____

Description of your work assignment _____

PARENT/GUARDIAN SIGNATURE:

DATE _____

SOCIAL STUDIES TEACHER COMPLETES:

_____ APPROVE APPLICATION _____ (initials)

_____ NOT APPROVED _____ (initials)