



Please Print.

Volunteer Community Service Form (20 hours)

Date	Activity	Organization	Total Hrs.	Supervisor	Supervisor Email; Phone No.	Supervisor Signature

It is the student's responsibility to maintain and return the verification of community service hours.

20 hours of service completed: Students can submit the form(s) to:

Mail: Central Arizona College, Financial Aid Department, Signal Peak Campus, 8470 N. Overfield Rd., Coolidge, AZ 85128

Email: finaid@centralaz.edu

I verify that this log is a true and accurate record of my unpaid community service.

<p align="center"><u>Sample Community Service</u></p> <p>Police Dept./Courthouse/Museums Hospitals/Library/Sr. Centers Recreation Depts./School District United Way of Pinal County Scouting groups/Other non-profits Civic events always need volunteers</p>

Print Student Name _____

Student's Signature _____

Telephone No. _____

Date of Birth: _____

High School: _____

Anticipated High School Graduation Year: _____

Email: _____