

**COMMUNITY SERVICE DIPLOMA ENDORSEMENT
STUDENT DOCUMENTATION FORM**

DIRECTIONS: Use this sheet to document your hours of service. Only service hours that include a supervising adult signature and email or phone number will be eligible for service credit.

STUDENT NAME	School	District/School System	Current Grade
	AHS	Avoyelles	

Date(s) of Completed Service:	Number of Hours:

Description of Service: SELECT A CATEGORY

Animals	Arts & Culture	Community	Crisis Support
Disaster Relief Emergency/Safety	Education/Literacy	Environment	Faith-Based
Health, Medicine, Wellness	Homeless, Housing & Hunger	Veterans & Military	Other

Enter a brief description here.

Adult Supervisor Name:

Adult Supervisor Phone Number:

Adult Supervisor Email:

Adult Supervisor Signature:

X

Student Signature:

X