

Verified by: \_\_\_\_\_ Date: \_\_\_\_\_  
Guidance Counselor

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## RYE HIGH SCHOOL COMMUNITY SERVICE FORM

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Student Name \_\_\_\_\_ Phone # \_\_\_\_\_

Student Address \_\_\_\_\_

Year of Graduation \_\_\_\_\_

Agency \_\_\_\_\_ Agency Supervisor \_\_\_\_\_  
(signature)

Agency Phone Number \_\_\_\_\_

Dates Worked \_\_\_\_\_ # of hours worked \_\_\_\_\_

Description of Activity \_\_\_\_\_

	Excellent	Good	Satisfactory	Poor	Comments
Reliability					
Honesty					
Appearance					
Public Relations					