



**Allatoona High School
Community Service**
"Anchored in Excellence"



PRINT Student Name: _____ Advisement Teacher: _____ Grade: _____ School Year _____

PLEASE RETURN TO: Lynne Spurlock in the Front Office BEFORE May 1.

Students completing 50 hours of community service will have the privilege of wearing a Community Service **Bronze Medal** at Graduation.
Students completing 100 hours of community service will have the privilege of wearing a Community Service **Silver Medal** at Graduation.
Students completing 150 hours of community service will have the privilege of wearing a Community Service **Gold Medal** at Graduation.

*Community Service hours should **ONLY** be those earned while supporting Allatoona High School or one of our Feeder Schools.*

Date of Activity	Number of Hours	Brief description of the service project	Sponsor's Signature	Phone # of Sponsor for off-campus activities

Over for additional hours and TOTAL
(Be sure to put total on back side even if not all spaces are used.)

Date of Activity	Number of Hours	Brief description of the service project	Sponsor's Signature	Phone # of Sponsor if this is an off-campus activity
TOTAL NUMBER OF HOURS:				

