

# BCHS

Burleson Collegiate High School  
201 S Hurst Road  
Burleson, TX 76028  
817-245-1600

## COMMUNITY SERVICE VERIFICATION FORM

*Please put only one Community Service Activity on a Form*

Name:

\_\_\_\_\_

Last	First	Middle
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Student ID Number: \_\_\_\_\_ Grade: \_\_\_\_\_ Hours worked: \_\_\_\_\_

Name of the community organization:

\_\_\_\_\_

Description of  
work: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Actual date work was performed: \_\_\_\_\_

Community Service codes: (Check the code that applies to the activity listed below.)

CH- \_\_\_ Church (includes Mission Trips, VBS, Nursery, etc.)

CM- \_\_\_ Community Ministries (include food/clothing/homeless projects)

CV- \_\_\_ Civic duties (includes City, Chamber, civic clubs, public library, Honeyfest, etc.)

ED- \_\_\_ Educational (includes school activities, library, etc.)

MD- \_\_\_ Medical (includes hospital, nursing homes, etc.)

SP- \_\_\_ Sports (coaching, sporting events, concession stand, etc.)

School Organization you are earning hours for:

\_\_\_\_\_

\_\_\_\_\_  
Signature of Adult Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of Adult Supervisor

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Phone number of Adult Supervisor

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Committee**

**Decision** \_\_\_\_\_

# BCHS

\_\_\_\_ Approved

\_\_\_\_ Not Approved

Signature:

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