

**KEYTESVILLE R-III SCHOOL
COMMUNITY SERVICE PROJECT -- MAKING SERVICE A WAY OF LIFE
SPONSORED BY SR HIGH FCCLA CHAPTER**

Complete and turn in a form for **EACH** community service project in which you participate.

- **ONLY ONE ACTIVITY AND DAY MAY BE RECORDED PER SHEET.**
- Work may not be completed for a relative. Form may not be signed by a relative.
- Log all hours. If work is completed outside the school district, only half the hours will be recorded. Must work in the presence of the person signing your form.
- A complete list of guidelines is available in the student handbook or the box outside the FACS Room.

Name of Student _____ Year of Graduation _____

Date of Service	Description of the Task/Service Completed	Where Completed	Number of Hours Worked/Served	Adult in Charge

I attest to the fact that the above names student accomplished this community service, **worked in my presence**, worked the number of hours recorded, is not related to me, and did not receive payment for the task.

Adult's Signature

Phone Number

Students, turn in this form to Miss Plymell. It will be kept on file in the FACS Room at Keytesville R-III School;
27247 Hwy 5; Keytesville MO 65261-2401; 660-288-3767