# **Central High School Community Service**

#### Students, by April 20, 2018, you will be expected to turn in your community service hours.\*

As you may be aware, Phenix City Board of Education drafted and passed legislation stating that 55 community service hours would become a part of the Central High School Requirements for Graduation beginning with the Central High School Class of 2013. Additional community service forms can be retrieved by going to <a href="http://www.pcboe.net/chs/guidance.htm">www.pcboe.net/chs/guidance.htm</a> Seniors click on Mrs. Kite's E page under forms and documents. Juniors click on Mrs. Lewis' E page under college information. Sophomores click on Mrs. Lovelock's E page under forms and documents.

\**Note:* Before you graduate from high school, you must have a total of **55** community service hours. A guideline for obtaining the hours is **10** your freshman year, **15** your sophomore year, **20** your junior year, and **10** your senior year.

\*If you are a member or become a member of a service organization at CHS, you can use the hours you obtain from participating in service projects with that organization to complete your required hours, but in order for those hours to count, it is **YOUR** responsibility to obtain a copy to turn in to the counselor for documentation. The counselor **WILL NOT** go to teachers and sponsors asking for student hours. (*A list of service organizations sponsored by CHS is listed at the bottom of the page.*)

**IMPORTANT:** The two following forms **must be filled out and signed** by your supervisor and turned in for your community service hours to be counted towards your graduation requirement. Hours may be done and turned in, in advance. For example, all 55 hours may be completed in one school year if a student chooses to do so, or a student may choose to do some extra hours any year to get ahead so that he/she has completed all hours before the senior year.

### SUGGESTED LIST OF PLACES TO VOLUNTEER

Planting Seeds
Jack Hughston Memorial Hospital
TEARS (Teens Empowerment Awareness with Resolutions)
Phenix City Youth Center (Boys and Girls Club)
Columbus Regional Healthcare System
Saint Francis Hospital
Phenix-Russell Library
Phenix City Beautiful
Habitat for Humanity
Girls Inc. of Columbus and Phenix City
Big Play After School Enrichment Program

Phenix City Parks and Recreation Child Advocacy Center Your School Local Nursing Homes Local Churches Russell County Department of Human Resources Local Elementary Schools Salvation Army Goodwill New Horizons Sky Clubhouse Afterschool Program Your Neighborhood!

#### CHS CLUBS/ORGANIZATIONS

Future Problem Solving BETA Club NJROTC Healthcare Academy Focus/Impact Student Council FBLA Honor Society CHS Band CHS Sports CHS Ambassadors

## Individual Service Supervisor's Comments

This form is to be filled out by the person supervising you with this service project/s. *This form* needs to be turned in upon completion of your hours. Make copies as needed.

Name	Grade	
Service Project Name		

Thank you in advance for completing this form. This sheet will be kept in the student's file and is an important element of his/her file. Please place a check mark in front of the appropriate statement based on the student's performance in the activity (please be honest), and feel free to write a brief comment if necessary. You may fax, mail, or return this form to the student.

### Central High School 2400 Dobbs Drive Phenix City, AL 36870 Phone: 334-298-3626 Fax: 334-298-0970

\_\_\_\_\_The student has successfully completed approximately \_\_\_\_\_hours of service for this activity/project.

COMMENTS:

\_\_\_\_\_The student has completed approximately \_\_\_\_\_\_ hours, but his/her character, willingness, or behavior was unsatisfactory in doing so. (Please write a brief comment as to what made them unsatisfactory.)

COMMENTS:

 Supervisor's Signature
 \_\_\_\_\_\_

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

## **Service Project Log**

On this sheet, be sure to record your service places, hours, and dates along with the initial of the person who supervised you during the time you were there. This sheet is to help you keep up with your hours and will need to be turned in upon completion of your hours. *Make copies as needed.* 

Date	Place	Number of hrs.	Supervisors Initials

Total Number of Hours \_\_\_\_\_

Supervisor's Signature\_\_\_\_\_