



# Community Service Documentation Form

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Grade \_\_\_\_\_ Year \_\_\_\_\_

Email Address \_\_\_\_\_ Organization Service was done with \_\_\_\_\_

Description of Service \_\_\_\_\_

## Minimum Total Service Hours Required by Grade by Level

8th-20, 9th-40, 10th-60, 11-80, 12- 100

Program Tips:

- Start early on your hours
- Don't miss deadlines
- Ask clarifying questions

## Community Service Hours

How to document hours: Under the "Service Date" column. Record each day that the service was performed the above organization in the format MM/DD/YY (Ex: 08/19/25)). For each day of work, list the number of service hours completed that day in the column "# of hours". You must use a different form for each organization you serve.

Service Date	# Hours Served	Service Date	# Hours Served

## Service Director/Sponsor Information

Dear Service Coordinator

The KAPS Service Program does not recognize double hours. This form should only include actual hours worked without pay by the student. By signing this document you verify that the information contained herein is complete and accurate.

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please take a photo of this form and upload it to the Hour submission Google form on the KAPS website.