

# Atlantic Christian Academy Community Service Hours

NAME \_\_\_\_\_ GRADE \_\_\_\_\_

The student named above has completed the following service hours on the following dates:

DATE	HOURS	AGENCY/ORGANIZATION	SUPERVISOR'S NAME (PRINTED)	SUPERVISOR'S SIGNATURE	SUPERVISOR'S PHONE #

**Total Hours** \_\_\_\_\_

**Date Submitted** \_\_\_\_\_

**Please Note:** 100 hours are required for graduation, 50 of which must be from a non-ACA organized event. All hours must be turned in prior to the end of the school year. Summer hours are due by the end of September of the same year. Service for one's own family and service for which one was paid for is not allowed.

**Student's Signature** \_\_\_\_\_ **(Please keep a copy of this form for your records)**