

# Community Service Form

Monterey Bay Academy



## Monterey Bay Academy

783 San Andreas Road  
La Selva Beach, California 95076-1911  
Phone 831.728.1481 Fax 831.728.1485  
<http://www.montereybayacademy.org>  
[info@montereybayacademy.org](mailto:info@montereybayacademy.org)

Student's Name \_\_\_\_\_

Grade  9  10  11  12

Date(s) of Activity \_\_\_\_\_

Time Involved with Activity \_\_\_\_\_  
Hours / Minutes

### Description of Activity

What was the activity? \_\_\_\_\_

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

What was your job or part? \_\_\_\_\_

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

Was this activity of benefit to you?  Yes  No

Why or Why not? \_\_\_\_\_

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

How was this activity of benefit to others? \_\_\_\_\_

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

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

*My signature indicates that I did the above services as described without receiving pay or Work Experience Credit.*

\_\_\_\_\_  
Date of Signature

### To the Supervisor

Thank you for your help in this project! Please read and sign below.

I attest that the above service was:

1. Personally supervised.
2. Voluntary with no payment or grade received by the student.
3. Not done for the student's immediate family.
4. Performed in the indicated number of hours.

*Please note that the student's parents may not sign this form.*

\_\_\_\_\_  
Supervisor Printed Name

Supervisors Phone# ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date of Signature