

COMMUNITY SERVICE FORM
French-American School of New York
145 New Street, Mamaroneck, NY, 10543

This portion is to be completed by the student:

Student's Name:

Grade and class:

Date of community service:

Duration (time spent doing the service):

Briefly describe the community service you performed.

This portion is to be completed by the person supervising the activity:

Name of the organization and/or organizer:

Signature of organizer:

Date: