Community service is an opportunity for students to develop a spirit of generosity and to give back to the community from which they have benefited. It is the responsibility of the student to pick their community service project, to volunteer ten hours of service to an organization of their choosing. You can choose one place to do all ten hours of community service or more than one. This should be completed by each student by the end of their sophomore year and returned to Emmy Charron, High School Guidance Counselor.

Briefly describe the proposed community service activity:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Briefly describe the community need that will be addressed:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

If you need help with ideas or filling out the application please see Emmy Charron, High School Guidance Counselor or Kim Ead, Career Development Coordinator (desk located in Omni office).

Some ideas of volunteer opportunities:

http://lllvt.org/student-resources (Community Service Opportunities Tab)

Chittenden Emergency Food Shelf (802) 658-7939

The Underground Teen Center in Winooski (802) 655-1392

The American Red Cross (802) 660-9130

Approved by:________________________ Date:______________________
Verification of Community Service Hours

______________________participated in _________ hours of community service at ______________________

(Students Name)

_________________________________ performing the following services:

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

Approved by (an adult overseeing Community Service):__________________________ Date:_____________