



Providing the Best Education for *ALL* Students
Excellence and Equity in Learning

Centennial High School
COMMUNITY SERVICE DOCUMENTATION FORM

This is to certify that _____ from

Centennial High School, Class of _____ has performed volunteer service on the date(s) and location(s) listed below.

Name of Organization/Non-Profit/Event: _____

Address: _____

Phone Number: _____

Date of the Event	Time In	Time Out	Total Hours Per Day

Specific Duties/Services Performed:

Supervisor Name (Please Print) _____

Supervisor Signature _____

Date: ____/____/____