**2019-20 BOARD OF EDUCATION AWARD**

***White Lake Middle School***

***Community Service Hours***

STUDENT NAME: GRADE: GENDER:

Eligible applicants must meet the 10 hour Community Service requirement.  **Please return this tally sheet to Student Services no later than Tuesday, April 28, 2020**

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| --- | --- | --- |
| **Community Service Performed** |  **Date****Performed** | **Hours****Performed** |
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My child has performed the Community Service listed above:

 Parent Signature **Total**

