

BISHOP UNION HIGH SCHOOL

RANDY COOK
PRINCIPAL



DAVID KALK
ASSISTANT PRINCIPAL

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GRADUATION COMMUNITY SERVICE VERIFICATION

First Name: _____ Last Name: _____

Current Grade: _____

School year: _____ Graduation Year: _____

Please return this form to the Guidance & Counseling Office at the completion of your community service activity but no later than June 1st of each academic year. Community service must be verified to meet graduation requirements. Bishop Union High School is dedicated to fostering high standards of scholarship and citizenship through service to the school and community. Your community service hours will be added to your permanent transcript.

Volunteer service may include working for a charitable/non-profit or community based organization (without pay). Work must be completed during the current school year, but may ***not be used as credit for another organization or requirement (CSF or ASB requirement).*** IF volunteering along with a family member - the service must be for a recognized community based or non-profit group (Mule Days, ESCA, Altrusa, etc.). Ask if there are ANY questions about your service being counted.

Activity Information

HOURS WORKED: _____ DATE(S) OF SERVICE: _____

DESCRIPTION OF SERVICE PERFORMED: _____

ORGANIZATION NAME: _____

Print Name of supervisor or adult verifying service: _____

Signature of supervisor or adult verifying service: _____

Contact phone # or e-mail: _____

Date received by Guidance Office: _____

Initials: _____

Date entered onto transcript: _____

Initials: _____

THE BRONCO WAY

☒ BE RESPONSIBLE ☒ USE GOOD JUDGEMENT ☒ HAVE CHARACTER ☒ SHOW RESPECT