

**Office employee section:**

Date Entered \_\_\_\_\_

Previous Hours \_\_\_\_\_

Hours this form \_\_\_\_\_

New Total hours \_\_\_\_\_

Initials of Main Office  
\_\_\_\_\_

**<sup>1</sup>GARDINER AREA HIGH SCHOOL  
40 WEST HILL ROAD  
GARDINER, MAINE 04345  
207-582-3150**

**COMMUNITY SERVICE PROJECT  
HOURS REQUIRED FOR GRADUATION FROM GAHS**

**COMMUNITY SERVICE DESCRIPTION FORM TO BE COMPLETED BY STUDENT**

Student's Name \_\_\_\_\_

Student's Advisor's Name \_\_\_\_\_

**Non-profit Organization for whom the service will be provided:**

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Brief description of service to be provided:

Location where service is to be performed: \_\_\_\_\_

Date(s) when the service will be performed: \_\_\_\_\_

Expected time to complete project (hours): \_\_\_\_\_

Approvals (signature)

Parent: \_\_\_\_\_

Date: \_\_\_\_\_

Asst. Principal: \_\_\_\_\_

Date: \_\_\_\_\_

Student: \_\_\_\_\_

Date: \_\_\_\_\_

Comments:

COMMUNITY SERVICE FORM TO BE COMPLETED  
BY STUDENT AND CONTACT PERSON

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To be completed by Student

What did you gain from this community experience?

What did you like about this community service experience?

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To be completed by Contact Person

I, \_\_\_\_\_ wish to validate that \_\_\_\_\_ has  
(Recipient) (Student)

Satisfactorily completed \_\_\_\_\_ hours of community service on \_\_\_\_/\_\_\_\_/\_\_\_\_

Please share with us the positive and/or negative aspects of this particular student and their service to you.

**GAHS COMMUNITY SERVICE REQUIREMENT**

- It is a graduation requirement at GAHS to complete 60 hours of community service( unless otherwise noted).
- The 60 hours of volunteer work may be completed at one of the pre-approved sites listed below.
- If a student wishes to complete hours at other sites, they must go through prior approval from their grade level administrator.
- All community service hours must be completed during the four years at GAHS ( summers included).
- All hours earned must be strictly volunteer work.
- Students are to submit this completed form to the Main office

**COMMUNITY SERVICE APPROVED SITES**

Alzheimer's Care Center 626-1770

Augusta Food Bank 622-5225

Area Churches

Augusta Boys & Girls Club for Teens 622-0452

Augusta Family Planning 622-7524

Augusta Salvation Army 623-3752

Big Brothers/Big Sisters Kennebec Valley 626-3408

Boys and Girls Club of Greater Gardiner 582-8458

Bread of Life Ministries 626-3434

Catholic Charities, Maine Home & Family Services 621-8520

Children's Center 626-3497

Children's Discovery Museum 622-2209

City of Gardiner (including public works and emergency departments) 582-4408

Crisis & Counseling Centers, Inc. 626-3448

Dayspring AIDS Support Services 621-6201

Families First Child Abuse & Neglect Council 626-3428/621-6274

Families Matter 621-1024

Family Violence Project 623-8637

Gardiner Community Food Center 582-5507

Gardiner Public Library 582-3312

Girl Scouts of Kennebec Council 772-1177

Goodwill Industries of Northern New England 623-1774

HealthReach HomeCare 626-3435

HealthReach Hospice & Volunteers of Kennebec Valley 626-1779

HealthReach WIC 621-6202

Kennebec Valley Dental Coalition 872-8891

Kennebec Valley Humane Society/Animal Shelter 626-3491

Kennebec Valley Mental Health Center 622-9622

Kennebec Valley YMCA 626-3488

Literacy Volunteers of Greater Augusta 626-3440

Maine General Medical Center 626-1000

Maine Poison Control Center 1-800-222-1222

Motivational Services, Inc. 626-3465

MSAD #11 Schools

Non-profit summer camps

Pine Tree Council, Boy Scouts of America 797-5252

Rural Community Action Ministries 524-5095

Senior Spectrum 622-9212

Sexual Assault & Crisis Support Center 377-1010

Southern Kennebec Child Development Corp. 626-3418

The United Way 626-3400

United Valley Chapter, American Red Cross 626-7837

United Way Food Initiative 626-3400

Winthrop Area YMCA 377-9686

Youth & Family Services 626-3478

Youth Athletic Programs

