Community Service Leadership Form  
2019-2020

Garden City Middle School offers our students opportunities to provide service and leadership both within our middle school community and our surrounding community.

10 to 14 hours = BRONZE LEVEL
15 to 19 hours = SILVER LEVEL
20 hours or more = GOLD LEVEL

Service must be done between October 24, 2019 - April 28, 2020

Name of Student: ___________________________  Grade: ________

Homebase Teacher: __________________________

Part 1: LOG HOURS

<table>
<thead>
<tr>
<th>Date of Service</th>
<th>Time Frame</th>
<th>Description of Service</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Hours Completed: [ ]

(Please write reflection on back of paper)

*REFLECTION AND PARENT SIGNATURE ON REVERSE SIDE

Sponsored by: Dr. Nezowitz, Dr. Fasano, Mr. Marr, and the Middle School Anti-Bullying Task Force

Student Signature: ________________________________________________

PLEASE RETURN ALL FORMS TO YOUR GUIDANCE COUNSELOR by 4/28/20
Part II: WRITE A REFLECTION OF YOUR EXPERIENCE

(Feel free to attach any photos)

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

By signing your signatures below, you verify that all service activities have been completed by the student from October 24, 2019 and April 28, 2020

Signature:__________________________________________________

Parent Signature:___________________________________________________

Date:________________________________________

Please return form to your Guidance Counselor by April 28, 2020