

El Toro High School

Saddleback Valley Unified School District

Community Assistance Permission and Verification Form

Student Name: _____ Birthdate: _____ Grade: _____

Graduation Requirement: Each high school student must complete at least eight hours of community assistance service prior to the last day of the 1st semester of their senior year. The organization must be "non-profit" and student may not receive payment for these services. Students will provide their own transportation while completing this service.

Organization Name _____

Summarize the goals, purpose, and activities of the organization:

Describe the activities or tasks of service performed:

Parent: I give my permission for my child to perform the community service described on this form. I hereby waive, release, and hold harmless the Saddleback Valley Unified School District and its personnel from any liability in the unlikely event of an injury while performing this service.

Student Signature _____

Today's Date _____

Date(s) of Service _____

Parent Signature _____

Telephone _____

Community Assistance Verification

Organization (*attach business card if available*)

Telephone No.

Title of Supervisor

Supervisors Name (Please Print)

Signature of Supervisor

Total Hours of Service

Please submit this completed form to the Guidance Office,

mm:10/14/15