

# NJHS Community Service Record

## Kimbrough Middle School

Name \_\_\_\_\_ Current Grade \_\_\_\_\_

Name of Organization: \_\_\_\_\_

*\*(If uncommon organization, please answer the following as well. If well known, then you may skip)*

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

\_\_\_\_\_

\*Description of Organization: \_\_\_\_\_

\_\_\_\_\_

Contact person: \_\_\_\_\_

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

Date(s) of Service \_\_\_\_\_ Total number of hours worked: \_\_\_\_\_

Description of duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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Signature of Supervisor: \_\_\_\_\_