

**CABRINI HIGH SCHOOL
COMMUNITY SERVICE PROPOSAL FORM**

**** You only need to fill out this form if the organization is not listed on the approved service organizations list on the website.****

Student Name _____ 2019-2020 Grade: _____
(Please Print)

Email (to contact if approved): _____

Instructions:

SERVICE HOURS MUST BE PERFORMED FOR A NON-PROFIT

(Service at a non-profit does not mean your child is not getting paid, it means the organization is not making a profit. Always ask if they have a non-profit Tax ID Number).

- 1) You will have to contact the service partner independently to set up a work schedule.
- 2) Make sure the service partner is aware that a letterhead detailing the service done, the amount of hours completed, and your supervisor's information will be required upon completion of service.
- 3) Junior/Senior service hours must involve **direct, hands-on service with people in need.**
- 4) **Any service work that is done at an organization that is not listed on the approved organizations list on the website must be approved by the Campus Minister, Mrs. Matherne. If the form is not turned in and approved, the hours will not count towards your service requirement.**
- 5) You can e-mail this form to tmatherne@cabrinighigh.com for approval.

Organization (Include contact information: name, email, and number)

1) _____

2) _____

What is the service that will be done (office work, tutoring, camp counselor, etc)?

(for office use only)

_____ Approved _____ Not Approved Reason: _____

Signature of Director of Campus Ministry: _____