



Multicultural Academy Charter School

An Award-Winning Charter High School
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COMMUNITY SERVICE Organization Form

Student Name: _____

Dear supervisor, the student above has expressed interest in completing **supervised** community service with your institution/organization. All of our students are required to perform community services at an approved **charitable/non-profit organization** during each school year.

We are pleased that our student chose your institution/organization. If you accept our student to do community services, please fill out the form's front and back.

I, the undersigned, certify that our institution/organization is a **charitable/non-profit** entity and approve the community service for the above student:

Name of Supervisor: _____ Position: _____

Name of Institution/Organization: _____

Address: _____ Telephone: _____

Signature: _____ Date: _____

Brief description of the services performed by the student:

COMMUNITY SERVICE

Timesheet

Please log your hours below. All hours **MUST** be signed by your supervisor listed on the front of this page.

Student Name: _____ Grade: _____

DATE	TIME IN	TIME OUT	TOTAL # OF HOURS	Activity Description	Supervisor's Signature

Both sides MUST be turned in to Ms. O'Brien for validation.

NOTE: At least 5 hours are due every quarter to pass.