



Superintendent's Challenge

Community Service 20__ 20__

Student Name: _____ Grade: ____ Date: _____

Student #: _____ Site: _____ CGUHSD Advisor: _____

“CGUHSD Advisor” is a **teacher, counselor, coach** or **adult AT YOUR SCHOOL** who will mentor you through Community Service and sign off on your community service logs.

All students may not work for family or have a family member authorize their hours.

1. Identify the category of Community Service with an “x” or complete the “other” box.

Education	_____	Environment	_____	Civic	_____
Health	_____	Social Service	_____	Cultural	_____
Informational	_____	Arts	_____	Economics	_____
Other:	_____				

2. CGUHSD Advisor: Please sign off on this sheet and email or send to the attention of Mary Rosenbam/Superintendent's Office or mrosenbam@cguhsd.org.
3. Community Service log of hours, once approved by the CGUHSD Advisor, they can be sent via interoffice mail or email to the attention of Mary Rosenbam/Superintendent's Office or mrosenbam@cguhsd.org no later than **April 9th**.

*CGUHS/VGHS students – complete 200 hours of community service in one school year (with hours beginning June 1 through April 9) and receive a varsity letter.

CGUHSD Advisor Signature: _____ Date: _____