



Westlake Christian Academy

Student Community Service Form

275 South Lake Street, Grayslake, IL 60030

847-548-6209

Student Name _____ Grade: _____

Grading quarter (*circle one*): 1st 2nd 3rd 4th Apply to school year: _____

Organization's name _____

Address _____

City _____ Zip _____

Community Service Supervisor _____
(please print)

Contact phone number _____

Description of Community Service:

	<u>Date</u>	<u>Day</u>	<u>Hours</u>	<u>Supervisor's Initials</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

<u>Date</u>	<u>Day</u>	<u>Hours</u>	<u>Supervisor's Initials</u>
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____
11. _____	_____	_____	_____
12. _____	_____	_____	_____
13. _____	_____	_____	_____
14. _____	_____	_____	_____
15. _____	_____	_____	_____
16. _____	_____	_____	_____
17. _____	_____	_____	_____
18. _____	_____	_____	_____
19. _____	_____	_____	_____
20. _____	_____	_____	_____
21. _____	_____	_____	_____
22. _____	_____	_____	_____
23. _____	_____	_____	_____
24. _____	_____	_____	_____
25. _____	_____	_____	_____
TOTAL HOURS		_____	_____

WCA Students:

- This form is to be turned into the school office each grading quarter.
- Please use a new form for each:
 - ✓ grading quarter
 - ✓ service organization you're working with
 - ✓ type of work you're doing

OFFICE USE ONLY: Processed by: _____ Date: _____