

# Spartan Honor Society

Name \_\_\_\_\_ Date \_\_\_\_\_

## ***Community Service Goal Sheet***

- **Community Service** outside of the school system - 16 hours
- **INCLUDE INFO ABOUT COMMUNITY SERVICE HERE!!!**

What do you plan to do to serve the community?

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What groups will you work with? (Please include the name of the sponsor or supervising adult.)

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What do you hope to accomplish with this goal?

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How often will you be working? (16-hour requirement)

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Where will this service take place?

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Why did you choose this goal?

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GOAL APPROVED \_\_\_\_\_ (parent) DATE \_\_\_\_\_

GOAL APPROVED \_\_\_\_\_ (SHS advisor) DATE \_\_\_\_\_

- Goals must be approved by parents before submission to SHS advisors.
- Goals must be approved by SHS advisors before service is started.



# Spartan Honor Society

Name \_\_\_\_\_ Date \_\_\_\_\_

## ***Community Service Petition***

• ***Community Service*** outside of the school system - 16 hours

BRIEFLY DESCRIBE THE COMMUNITY SERVICE YOU PERFORMED:

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Whenever possible bring in photographs of team, membership cards, certificates, or awards to verify your participation in these activities. These will be returned to you.

### **VERIFICATION OF SPONSORING OR SUPERVISING ADULT**

This student has spent sixteen or more hours in the activity described above during the time they have attended Arcade Middle School.

***Parents may not sign in place of the sponsor or supervising adult.***

Sponsor's Name (please print) \_\_\_\_\_

Sponsor's Signature \_\_\_\_\_

Sponsor's position \_\_\_\_\_

Phone # \_\_\_\_\_ email \_\_\_\_\_

*Additional sponsors may write this information on the back of this paper.*

Petition Approved \_\_\_\_\_ (SHS advisor) Date \_\_\_\_\_

**This document will not be accepted unless it is stapled in the following order: petition, goal sheet, log sheet, other documents (report cards, participation forms, etc.).**