## SDMC Community/Volunteer Service/Work Verification Form

Τh	nis form must	be completed	l, and all signs	atures obtained o	rior to starting	a volunteer	service/work	r project.	KEEP CO	PIES FOR	YOUR RECOR	DS

tudent Name:	Grade:	<u>Scho</u>	<u>ool:</u>	
itle of Project: /Job:	Sponsoring Club/O	rganization/Compan	<u>y:</u>	
roject Supervisor:	Supervisor's Phone	Number:		
Preservation of environment and protection of histo				
Promotion of health, welfare, and safety in our common terms of standard of living for residents of our common terms.				
Encouragement of the growth of arts in our commun				
Improvement and enrichment of the lives of the mer		disabled of our comm	nunity	
Promotion of a quality of life for the senior citizens of				
Provision of leadership, guidance, and activities for the	ne youth of our comr	nunity		
Promoting animal welfare  Promoting literacy				
Improving and enriching the lives of homeless and/o	r those living in pove	ertv		
Area of interest for future career/profession	T those hving in pove			
IB Students Only: Please circle one:	Creativity	Action	Service	
scription of Community Service/Work Projectidentify dress the issue selected above:	y activities/work that	t will be done as a pa	rt of this project an	d how it will
dress the issue selected above:	y activities/work that			d how it will
	y activities/work that	Paren	t Signature	
dress the issue selected above:		Paren		
Student Signature  Service Project/Work Supervisor Signatu		Paren Volunteer Service	t Signature	