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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| The Moniker foundation | | | | | | | | | | |
| Student Community Service Activity Form | | | | | | | | | | |
| Student Name: | | |  | | ID#: | |  | | | |
|  | | | | | School: | | | |  | |
|  | | | | | | | | | | |
| Community service organization | | | | | | | | | | |
| Date |  | | | | Time spent | | | Hours: | | Days: |
| Organization | |  | | | | | | | | |
| Supervisor | |  | | *Phone #* | |  | | | | |
| Activity responsibilities | | | | | | | | | | |
|  | | | | | | | | | | |
| Additonal notes | | | | | | | | | | |
|  | | | | | | | | | | |
| Student Signature: | |  | | | Date | |  | | | |
| Supervisor  Signature: | |  | | | Date | |  | | | |

\*By signing above, both the student and community service supervisor attest that said student completed a community service activity in order to fulfill the requirements of The Moniker Foundation’s Scholarship Program.