*Saddleback Valley Unified School District*

**Community Assistance Permission and Verification Form**

**Graduation Requirement:** Each high school student must complete at least eight hours of community assistance service prior to May 1st of his/her senior year. Students will provide their own transportation while completing this service. The organization must be “non-profit” and student may not receive payment for these services. For ideas on Community Service opportunities please refer to: <http://www.svusd.k12.ca.us/> and under featured links click on “guidance” then go to Community Resources tab.

Student Name Date of Birth

*Please print*

High School Grade

**Parent:** I give my permission for my child to perform the community service described on this form. I hereby waive, release, and hold harmless the Saddleback Valley Unified School District and its personnel from any liability in the unlikely event of an injury while performing this service.

Parent Signature Telephone Date

Organization Name

**Student:** Summarize the goals, purpose, and activities of the organization:

Describe the activities or tasks of service performed:

I verify that I performed the service described above.

Student Signature Date(s) of Service

**Student must submit this completed form to the Guidance Office when a total of eight hours of service has been completed**

DMF 10/12

**Community Assistance Verification**

Organization (attach business card if available) Print Name of Supervisor

Telephone Number Title of Supervisor

Total Hours of Service Signature of Supervisor