Kindness Community Service Project

Completion Form (10 Hours)

Due February 1st

Artist Information:	
Name:	
Email:	
Phone Number:	
Drainat Dataila	CHAPTER #6 59 AO
Project Details:	CHAPTER *
Project Name:	
Date of Event: Description of Activity:	
Documentation:	
Check the box to confirm that a picture Club Google Classroom	of the completed activity has been submitted on Art
Supervisor Information:	
Supervisor's Name:	
Supervisor's Email:	
Supervisor's Phone Number:	
	k Ethic:
By signing this form, I confirm that I have co (10 Hours) as described above and that the completed activity.	ompleted the Kindness Community Service Project attached picture accurately represents the
Signatures:	
Student Signature:	Date:
Artist Supervisor Signature:	

Instructions:

- 1. Fill out the required information.
- 2. Describe the community service project you completed.
- 3. Check the box if you have attached a picture of the activity.
- 4. Sign and date the form.
- 5. Ask your supervisor to sign and date the form.
- 6. Submit the completed form to the appropriate authority.