

Community Involvement Contract

STUDENT NAME: _____ **Phone #** _____

KHS SSR TEACHER: _____ **Phone #** _____

Name of Organization: _____

Evaluator's Name _____

Address:

City _____ **State** _____ **Zip** _____

Phone: _____

Email: _____

I, the undersigned, do agree to allow _____ to
volunteer for twenty hours during the school year. We have met; I understand the goals
for the community involvement and the direction of the student's interests.

Organization Representative

Date

I have read the written proposal and reviewed the above signatures. As outlined, this
proposal meets the guidelines of the Community Involvement requirement.

KHS SSR teacher

Date

Community Involvement Work Plan

Please complete this plan with the community involvement agency representative or agency evaluator present.

DESCRIPTION OF PROJECT/PURPOSE OF ASSIGNMENT:

(Include a list of tasks or responsibilities)

- 1.
- 2.
- 3.
- 4.
- 5.

TRAINING/QUALIFICATIONS AND SUPPORT PLAN:

(Describe how you are trained or prepared for the work)

TIME COMMITMENT:

(Minimum hours per week/month)

Evaluator's Signature Title/Role

Date

Volunteer Student Signature

Date