



Calvary

Christian High School

5873 Kendra Rd. Fruitport, MI 49415 231-865-2141

Community Service Voucher Slip

Name: _____ Grade: _____

Name of Agency: _____

Tasks: _____

Hours worked: _____ Date: _____

A parent and an agency representative must sign below:

Signature of Agency Rep. _____

Signature of Parent: _____

All service other than that on the published CCS Community Service Opportunities List should be approved in advance. Return the completed service slips to the school principal.



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