



Steele High School AFJROTC Community Service Documentation

The following information must be completed in order to receive credit for community service performed with outside agencies.

Student Name _____ School ID # _____

Community Service Agency or Event: _____

To be completed by the community service agent:

Date(s) of Service _____ Total hours _____

Description of service performed.

Community Service Agent:

Your signature below indicates confirmation of the service performed by the Steele High School AFJROTC Cadet. You may be contacted to verify information. If you have any questions, please contact the Steele HS AFJROTC office at jparish@scuc.txed.net or 210-619-4025 or 4026.

Printed Name

Signature

Daytime Telephone Number _____