



TACOMA BAPTIST SCHOOLS  
High School Community Service  
Report Form

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Date of Service \_\_\_\_\_ Hours Served \_\_\_\_\_

Place of Service \_\_\_\_\_

Name of Supervisor (printed) \_\_\_\_\_

Signature of Supervisor \_\_\_\_\_

Brief description of service performed: (Include what you did, whose needs were met, and how your life was impacted.)

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Please Return Completed Form to the Office.  
(To receive credit, all forms must be filled out completely and correctly.)