

Federal Way Public Academy
Community Service
Academic School Year _____

Student Name _____ Student # _____ Grade _____

Federal Way Public Academy enjoys strong support, given in countless ways, from many friends throughout the community. As part of the community, the school feels an obligation to give as well, and it is done with great pride through service to the community. Student's community service hours are reported below. This form, along with essay (see more information below), is to be turned in to the school office by May 29, 2009.

<u>Activity 1</u>	Number of hours for this activity _____
Name of organization / association / group _____	
How did you account for the hours?	
<input type="checkbox"/> Log (over), or;	<input type="checkbox"/> Letter from organization (copy attached), or;
<input type="checkbox"/> Certificate (copy attached), or;	<input type="checkbox"/> Other (how?) _____
Activity Description _____	

<u>Activity 2</u>	Number of hours for this activity _____
Name of organization / association / group _____	
How did you account for the hours?	
<input type="checkbox"/> Log (over), or;	<input type="checkbox"/> Letter from organization (copy attached), or;
<input type="checkbox"/> Certificate (copy attached), or;	<input type="checkbox"/> Other (how?) _____
Activity Description _____	

<u>Activity 3</u>	Number of hours for this activity _____
Name of organization / association / group _____	
How did you account for the hours?	
<input type="checkbox"/> Log (over), or;	<input type="checkbox"/> Letter from organization (copy attached), or;
<input type="checkbox"/> Certificate (copy attached), or;	<input type="checkbox"/> Other (how?) _____
Activity Description _____	

As the parent / guardian of the above-named student:

Confirmation

I confirm the above activities have taken place and I understand the required hours of community service plus a one-page essay are required by May 29, 2009.

Exemption

I am applying for an exemption for the following reason: _____

Parent / Guardian Signature _____ Date _____

Office Use Only	
<input type="checkbox"/> Expectations Met	<input type="checkbox"/> Expectations Not Met, reason: _____
FWPA Administrator Signature _____	Date _____

