Iredell County Crosby Scholars Community Service Form

Forms due no later than: 1/31/2021 for 11th – 12th Grades 3/31/2021 for 6th – 10th Grades

How to submit: By mail, fax, smartphone photo, or email to the Iredell County Crosby Scholars Office (contact info. is listed below), or to your guidance office as you complete your community service hours, but no later than the deadline listed above for your grade level. Forms may also be uploaded under My Documents in your portal. Your student portal will show fulfillment of this requirement under the tab “Program Info” once your form is approved by Crosby Scholars staff.

Students should complete this form.
Please print neatly. Do not leave any information blank.

Your name: ___________________________ Email address: ___________________________

School: ___________________ Graduation Year: ___________________ 
(2 hrs required; 5 hrs recommended for high school students)

Date(s) you volunteered: ___________________ Total hours: ___________

Students: Briefly, but specifically, describe what you did during your community service activity. You may also explain how this activity made a difference in your community. (This section should be completed by the student in order to receive community service credit.)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Name of organization/non-profit where you volunteered: __________________________________________

Organization contact person’s name: __________________________________________________________

Contact person’s email address: ______________________________________________________________

Contact person’s telephone#: _________________________________________________________________

Signature of person in charge of your community service activity: _________________________________

I, ____________________________________________________________, verify that ___________________________, completed the above listed community service hours under my supervision.

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• Community service may not be performed at for-profit organizations/businesses or with family members. Please visit our website to review a list of suggested community service opportunities.

• Crosby Scholars staff reserves the right to determine if this activity fulfills the community service requirement.

• The person in charge of this community service activity must sign this form to verify your participation.

• A form signed by your parent or guardian will not be accepted.

• Please make a copy of this form for your own records before you submit it.