Iredell County Crosby Scholars Community Service Form 2020-21

How to submit: 1) Preferred method: Upload this form to 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. Other options: 2) take a photo on a smartphone and email it to info@crosbyscholarsiredell.org, 3) mail it to our office, 4) fax it to 704-873-4891.

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

Your name: __________________________________________ Email address: ______________________________

School: __________________________________________ Graduation Year: __________

Date(s) you volunteered: ___________________________ Total hours: __________ (2 hrs required; 5 hrs recommended for high school students)

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.)

________________________________________________________________________

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________________________________________________________________________

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

Organization contact person’s name: ________________________________________________

Contact person’s email address: ______________________________________________________

Contact person’s telephone#: __________________________________________________________________

● Community service may not be performed at for-profit organizations/businesses. 
● Please visit our website to review a list of suggested community service opportunities, including virtual options. 
● Crosby Scholars staff reserves the right to determine if this activity fulfills the community service requirement. 
● A parent may sign the form if he or she was the supervisor.

Please make a copy of this form for your own records before you mail this form