2000 N Santa Fe Ave Vista, CA 92083 Phone 760-631-8500 Fax 760-631-8503

Petition for Summer Community Service Credit

| I, | , (print s | student name) am j | petitioning to have | my summer |
|---|---|--|--|------------------------|
| community service hours community service plan | ount for the 2018-2019 | | | |
| Agency/Organization Name | ?: | | | |
| Agency/Organization Conto | act Person and Phone | Number: | | |
| Summary of Activities: | | | | |
| Estimated number of hours | that will be completed | | | |
| I understand that my petition If my petition for summer of completed community service credit. Add. Catalog, and community service can be completed du | community service cre vice logs to the Coun itional community ser- ervice logs are available | edit is approved, I seling Department vice guidelines ca | will be required to that by September and be found in the | 30, 2018 to GPA Course |
| Student signature: | | | Date: | |
| Parent signature: | | | Data | |
| | | | Date: | |
| Phone number: | | | | |
| Phone number: | | | | |
| | Official V | | | |
| Phone number:eeived by:eministrator/Designee Signature: | Official \ Date: | Use Only | | |