



César Chávez Academy High School
1761 Waterman St.
Detroit, MI 48209
Office (313) 551-0611 Fax (313)551-0552

Student Name: _____

Graduation Year: _____

Phone Number: _____

Approval Signature & Date: _____

COMMUNITY SERVICE LOG

DATE OF SERVICE	ACTIVITY/DESCRIPTION OF WORK	PLACE/CONTACT INFO.	SIGNATURE/TITLE	HOURS

NOTE: Community service must be completed at a non-profit organization. Please save any letters written on your behalf as recommendations for college/scholarships applications.