

Date/Date Range	Hours for Period	Organization/School/ Religious Institution/ Service Club	Contact Must be an adult and not an immediate family member	Contact Phone Number	Signature of Contact	Contact, Please Check one*
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Total Hours for the period: _____

Please return your signed form no later than
December 1st
 (If this is a weekend or holiday the form is
 due the following business day.)
 Retain a copy of this document for your records

The College Access Center
 1206 Boardman Rd
 Jackson, MI 49202
 (517) 990-0671



Completion Plan: Please specify your plan below for achieving 40 hours of community service before the end of the award period.
Failure to provide an approved plan will result in forfeiture of your second semester award. Your plan must be received and approved by the Jackson Legacy Program on or before **December 1st**.

Organization	Contact Person	Contact Phone #	Expected Hours	Confirmation of Start Date