



JORDAN-ELBRIDGE HIGH SCHOOL
JORDAN-ELBRIDGE CENTRAL SCHOOL DISTRICT

**** THE JORDAN-ELBRIDGE CENTRAL SCHOOL DISTRICT REQUIRES **5** HOURS
OF COMMUNITY SERVICE **PER YEAR** FOR ALL OCC ADVANTAGE STUDENTS.
Please return completed form to the Guidance Office

******Certificate of Completion******

Grade: _____

I hereby certify that _____ has successfully
(Print name of student)
completed _____ hours of volunteer community service towards the
requirement.

Description of service provided:

Date of service: _____

Name of Organization: _____

Signature of organization representative: _____

Print name and title: _____

Address/phone #: _____

