

**COMMUNITY SERVICE FORM**

**Student Name:** \_\_\_\_\_ **I.D. #:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **File #:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Cell Phone #:** \_\_\_\_\_

\*\*\*\*\*

**Instructions:**

You are required to complete \_\_\_\_\_ hours of Community Service by \_\_\_\_\_ (date) with \_\_\_\_\_ (location).

Unless otherwise assigned, you may go to the Community Services, 145 Campus Center (The Compass) to speak with them about upcoming Community Service opportunities.

- While in the office, sign up for their listserv.
- You do not need to disclose to them WHY you are doing the community service, however you must have all of the information about what you need to do (# of hours) and if there are any restrictions about the type of service you can do.
- If you would like to complete your hours somewhere else other than what is indicated on this form, **contact your hearing officer in advance to get permission before beginning service.**
- If you need more time to complete the hours, send an email to your hearing officer or to conduct@oswego.edu at least 2 days before this assignment is due to request more time. Suggest a new due date that you can meet.

***When service is complete:***

- ⇒ Have the supervisor of the service project sign and date this form.
- ⇒ Sign and date this form verifying you have completed assigned community service hours.

**Deliver this form to Student Conduct, 501 Culkin Hall by the due date.**

## Community Service Timesheet

<b>Date</b>	<b># of hours</b> <small>.25 = 15 minutes .50 = 30 minutes .75 = 45 minutes</small>	<b>Service provided:</b> <ul style="list-style-type: none"> <li>• <b>Community Service Site</b></li> <li>• <b>Responsibilities</b></li> </ul>	<b>Supervisor Information:</b>
			Name: _____ Phone/Email: _____ Signature: _____
			Name: _____ Phone/Email: _____ Signature: _____
			Name: _____ Phone/Email: _____ Signature: _____
			Name: _____ Phone/Email: _____ Signature: _____
			Name: _____ Phone/Email: _____ Signature: _____

**Total hours served:** \_\_\_\_\_

Student's Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return this form to:  
 SUNY Oswego Student Conduct 501 Culkin Hall  
 Phone: (315) 312-3378 Fax: (315) 312-2503 [conduct@oswego.edu](mailto:conduct@oswego.edu)