



**North Lake School District No. 14**

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57566 Fort Rock Road, Silver Lake, OR 97638 ♦ 541-576-2121 ♦ FAX 541-576-2705

# COMMUNITY SERVICE

This is to certify that

\_\_\_\_\_   
 (student's name)

has completed \_\_\_\_\_ hours of

community service for \_\_\_\_\_   
 (company name)

from \_\_\_\_\_, \_\_\_\_\_ to \_\_\_\_\_, \_\_\_\_\_   
 month year month year

Company Representative's Signature \_\_\_\_\_

Date Signed \_\_\_\_\_