

CHERITON GROVE CORPORATION

Cheriton Grove Apartments
20 Cheriton Road
West Roxbury, MA 02132

High School Community Service Completion Form

Date: Student's Name:

Helped Specific Tenant [] Helped Management [] [check one or both]

Hours that student performed community service (in 15-minute increments) was: [example - 1.25 means 1 hour and 15 minutes]

School or Program information in which student is required to perform and report these community service hours:

School / Program Name:

City / Town: ST:

Contact Name: Telephone #:

Private [] Public [] Home Schooled [] Chartered [] Parochial []

By signing below, I hereby agree that the above named student has performed necessary and qualified community service work at Cheriton Grove Apartments.

The community service performed is in compliance with the policy established by the Cheriton Grove Corporation dated February 7, 2006.

[] Resident Service Coordinator Signature or [] Site Manager Signature Date

Print Name: Telephone # - 617-325-1913

E-mail address chgrove@tcbinc.org Fax # - 617-325-4169