



# TYRONE

## AREA HIGH SCHOOL

*Soaring Forward to Explore, Challenge and Succeed*

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**THOMAS A. YODER**

**Principal**

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**LUCAS D. RHOADES**

**Dean of Students/Athletic Director**

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### STUDENT COMMUNITY SERVICE FORM

Student Name:	Current Grade Level:
Date(s) of Service:	Total Volunteer Hours:
Print Name of Supervising Adult:	
Signature of Supervising Adult:	
Phone Number of Supervising Adult or Organization:	
Where did your activity occur?	
What was done in the activity? (Please describe in detail how this activity was done.)	
Who or what benefited from your involvement?	
Describe why this was or was not a valuable experience:	

**Please return the completed form to the High School Counseling Office**