

SCHOOL COMMUNITY SERVICE

Grades 9–12 • Administrator-Assigned Intervention

Student: _____ Grade: _____ Date assigned: _____
 School: _____ Administrator: _____ Parent contacted: _____

1 WHY THIS INTERVENTION IS BEING ASSIGNED

Purpose and accountability: This intervention is assigned in response to identified behavior. Its purpose is to provide a constructive opportunity to accept responsibility, address the impact of your conduct, and demonstrate readiness to meet school expectations. Failure to complete the assignment will be documented and reviewed by the administrator.

Behavior or incident being addressed: _____

2 COMMUNITY SERVICE PLAN • Complete before service begins

Service task	☐ Campus/community betterment ☐ Event set-up or clean-up ☐ Library/office support ☐ Materials or inventory organization ☐ Approved school support project ☐ Other: _____
Where	Location: _____
When	Date: _____ Start: _____ End: _____ Total: _____ hr(s) _____ min
Adult supervisor	Name/title: _____
Success looks like	The student reports on time, follows all directions, remains actively engaged, uses professional conduct, and completes quality work.

Student expectations

- | | |
|---|--|
| ☐ I will report on time and remain for the full assigned period. | ☐ I will follow all directions, safety rules, and site procedures. |
| ☐ I will remain engaged and keep my phone/earbuds put away. | ☐ I will use professional conduct and protect confidential information. |

Safety and supervision check (administrator)

- ☐ Task is age-appropriate, directly supervised, and completed during nonschool hours.
- ☐ No hazardous chemicals, bodily-fluid clean-up, power equipment, climbing, traffic exposure, or confidential student records.

3 NOTICE AND PERMISSION

ON-CAMPUS SERVICE — PARENT/GUARDIAN NOTICE

I understand the assignment described above. My signature acknowledges notice; it is not a condition for assigning supervised on-campus service.

Parent/guardian signature: _____ Date: _____

OFF-CAMPUS SERVICE — WRITTEN PERMISSION REQUIRED

☐ I give permission for my child to complete the off-campus service described above.

Parent/guardian signature: _____ Date: _____

Administrator assignment Signature: _____ Date: _____

COMMUNITY SERVICE REFLECTION & COMPLETION

The student completes this page after the service task.

Student: _____

Grade: _____

Date completed: _____

4 STUDENT REFLECTION • Respond thoughtfully and specifically

A. What conduct led to this intervention, and what school expectation was not met?

B. What impact did your conduct have on others or the learning environment, and how did this service help address that impact?

C. What specific strategy or decision will you use to prevent the same situation from happening again?

After completing this service, I:

☐ **Accepted responsibility**

☐ Addressed the impact

☐ Need more reflection

☐ Need support

5 SUPERVISOR COMPLETION RECORD

Completion status

☐ Completed as assigned ☐ Partially completed ☐ Not completed

Actual service

Date: _____ Total time: _____ hour(s) _____ minutes

Student participation

☐ On time ☐ Followed directions ☐ Remained engaged ☐ Professional conduct ☐ Needed redirection

Supervisor notes

Follow-up

☐ Intervention complete ☐ Student conference ☐ Parent contact ☐ Additional support

Student signature: _____ Date: _____

Supervisor signature: _____ Date: _____

Administrator review: _____ Date: _____

Administrator reminder: Use the service as a constructive, proportionate intervention. Do not assign humiliating, unsafe, unsupervised, or academically exclusionary tasks.