

# Community Service Corps School Monthly Report

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From: \_\_\_\_\_ School: \_\_\_\_\_

Date: \_\_\_\_\_

Report for the Month of: \_\_\_\_\_

Please fill in activities for this month only and fax back at the end of the month. Please use an additional sheet if necessary.

# of CSC Members: \_\_\_\_\_ # Active this month: \_\_\_\_\_

Name of Program: \_\_\_\_\_ Service Site \_\_\_\_\_

Description: \_\_\_\_\_

Number of student participants: \_\_\_\_\_ Frequency of program: \_\_\_\_\_

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