



Gale Ranch Middle School

Home of the Gryphons

6400 Main Branch Road, San Ramon, CA 94582
Phone: (925) 479-1500 Fax: (925) 479-1595



Lisa Ward
Principal

GIA GRYPHONS IN ACTION

Matthew Chamberlain
Assistant Principal

STUDENT INFORMATION

Complete all information and return to the GIA box in the office.
Incomplete forms will delay the assignment of points.

Last Name: _____ First Name: _____ Grade: **6 7 8**

Phone: _____ Parent Email: _____

ACTIVITY INFORMATION

Date(s) of Service (mm/dd/yy): _____

Service performed for: _____

(Reminder: Points cannot be earned if the student has been paid or received other compensation or recognition, such as a Scout Badge)

Total time of service provided: **HOURS** _____ **MINUTES** 15 30 45
(1 hour = 8 points/Maximum of 8 hours per day) **Print Clearly**

Type of Service:

<input type="checkbox"/> Babysitting <input type="checkbox"/> Bake Sale <input type="checkbox"/> Camp Helper <input type="checkbox"/> Office Help <input type="checkbox"/> Food Bank <input type="checkbox"/> House Sitting (limit 3 hrs) <input type="checkbox"/> Party Help <input type="checkbox"/> Pet Sitting (limit 3 hrs)	<input type="checkbox"/> Registration <input type="checkbox"/> Retirement Home <input type="checkbox"/> Summer School <input type="checkbox"/> Teacher's Helper <input type="checkbox"/> Textbook Help <input type="checkbox"/> VBS <input type="checkbox"/> OTHER _____
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Why do you consider this a community service? How did this help other people?

BENEFICIARY INFORMATION

Name: _____
Please Print Clearly

Signature: _____

Phone: _____

Relationship to Student: _____ and/or Title: _____ Date: _____
(Reminder: Only 100 Points can be earned for services performed for immediate family, i.e. parents, grandparents, aunts, uncles, cousins, siblings)