

Year of Report: _____

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Midwest Central Young Marines Community Service Report



Dear Sir or Madam:

In order for a Young Marine to earn their Community Service Ribbon and to earn credit for their Citizenship Learning Objectives, this form must be completed.

A Young Marine must perform 50 hours of service per year that is beneficial to a community, veteran's organization, military unit, service organization (Red Cross, Salvation Army, etc.), youth group or school. The 50 hours must be accumulated within one (1) years time period. Therefore, if you are a member of one of the before named organizations and you witnessed the below named Young Marine work for your organization, please help this Young Marine by filling out this form.

Thank you, and have an outstanding day,

Midwest Central Young Marines' Staff

Young Marine's Name: _____

Please fill in the information that applies.

Date of Service	# of Hours	Was the service beneficial	Community/Organization's Name	Organization's Address	Please Print Name	Signature
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		enter your house # and street name enter your city and state, and zip code		