

Volunteer & Service Project Proposal



Student Name: _____

ID Number: _____

Graduation Year: _____

Agency/Business Name: _____

Agency/Business Phone: _____

The social issue I will address is (check all that apply):

☐ Elder Care

☐ Human Rights

☐ Addiction

☐ Childhood Obesity

☐ Environmental Protection / Recycling Reason

☐ Fundraising / Community

Engagement ☐ Literacy / Education

☐ Poverty / Hunger /

Homelessness ☐ Bullying / Abuse

☐ Mental & Physical Disabilities

Complete ONLY if completing this Proposal for a SERVICE PROJECT.

Please describe the project being propose with detail on what you will be doing:

Student Signature

Date

Parent Signature

Date

Non-Profit Agency Contact Signature

Date

LWHS Community Service Coordinator Signature

Date

The Community Service Coordinator has been contacted and the project is _____ APPROVED _____ NOT APPROVED
Return form to Krista Thompson krista.thompson@lwcharterschools.com Revised 9/15/25