

TASC Service Project Information Form

School: _____

Project/Fundraiser Title: _____

Description of project/fundraiser: _____

Number of hours volunteered/ money raised: _____

Date(s) of time volunteered/ fundraiser(s): _____

Number of student council members that participated: _____

Any ideas that you used that would be applicable to other councils: _____

Thank you very much for helping with St Jude Hospital!

Please email this form to: sarahataylor1999@gmail.com or mail it to:

Sarah Taylor

BCHS StuCo

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