Clean Green Chessie Machine
Participation Verification
2018-2019

Student Name:_____ **Grade**_____

Name of School: Chesapeake Terrace Elementary

Directions: Please complete the information each time a cleanup is performed.

Date	Time Spent On task	Brief Description of Service Number of bags collected	Number of Participants

Parent Signature: _____

Student Signature:_____

Please stop by the school office if additional forms are needed!