



Community Service Verification Form

This form is to verify that the student named below has completed volunteer community service for a non-profit organization.

Student Name _____ Age _____

Date	Time	Description of Service Provided	Hours
		Total Hours	

Name of Organization Representative _____ Email _____

Organization _____ Title/Position _____

Signature _____ Date _____

Student Signature _____ Date _____

We thank you for providing the volunteer opportunities to our students!