

Teacher's Signature: _____ Date: _____

Community Service Verification Form

(Please print and use ink in completing this form)

This box to be completed by student:

Name: _____ Period: ____ Date: _____

School: _____ Community: _____

Describe activity:

What specifically did you do and what did you learn from this experience?

Verifying Agent Please Complete the Following:

I hereby certify that _____ has participated in
(Student's Name)

and completed _____ hours of community service as described below:

_____ between the hours of _____ and _____
(Date of Activity)

(Name and Position of Certifying Adult)

(Phone Number)

Comments on student performance: (Use back of form if needed)