

Community Service Verification Form

STUDENT AND PLACEMENT INFORMATION

Student Name

Year of Graduation

Brief Description of Community Service Activity (can be a list)

Supervisor's Name:

Date(s) of Service:

Time In: Time Out:

Total Number of Hours:

VERIFICATION

I certify that the above named student has performed the number of community service hours indicated in the "Student and Placement Information" section without monetary compensation.

Supervisor's Signature

Supervisor's Comments (optional):

Please return the completed form to Ms. Frazer to ensure you receive credit.

Graduation Requirement Coordinator's Signature:

