



## Volunteer Community Service Record

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Service Site/Location of Service Performed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe the community service performed (Use an additional sheet if necessary):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Service Date(s) and Hours: \_\_\_\_\_ Date: \_\_\_\_\_ Hours: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Verification of Service:

I verify that \_\_\_\_\_ has completed the following hours of community service.

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Service Date(s) and Hours: \_\_\_\_\_

Name of Verifying Agent: \_\_\_\_\_

**Signature of Verifying Agent:** \_\_\_\_\_