

Volunteer Community Service Documentation Form

This is the certify that _____ from
Student Name

_____, Class of _____ has performed volunteer service at
Name of School

Name of Organization/Non-Profit/Event: _____

Address: _____

Phone Number: _____



Date of Event	Time In	Time Out	Total Hours Per Day

Specific Duties/Services Performed:

Supervisor Name (Please Print) _____

Supervisor Signature _____

Address (if different from above)

Phone Number: _____ Attached Letterhead from Organization Yes No

Parent/Guardian Signature _____ Phone Number: _____

Student Signature _____