

Community Service Hours Certification

| Student's Name: | |
|---------------------------------------|---------------------------------------|
| Service Organization: | |
| Date of Service: | |
| Service Project Description: | |
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| I acknowledge that | participated in the service |
| project described above and completed | hours towards their community service |
| requirements. | |
| Print Name: | Date: |
| Signature: | |

This must be signed by someone from the service organization.

*Please return this form to the Front Office.