



## EXTRACURRICULAR HOURS VERIFICATION FORM

Student to Complete (print neatly):

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Community Service: \_\_\_\_\_

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

Location: \_\_\_\_\_

Contact Person/Supervisor: \_\_\_\_\_

Supervisor Phone Number: \_\_\_\_\_

Supervisor Email: \_\_\_\_\_

Explain The Service You Completed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor to Complete: **One verification form should be submitted for each service activity**

Volunteer Arrival Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_ Total Hours Completed: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_