Community Service Connection Verification Form

| TO: | | | |
|--------------|--------------------------------|----------------------|-------|
| | Verification of Community | | |
| | | | |
| This letter | is to verify that(Student | ts Name) completed | hours |
| as a volunt | eer for | | on |
| Days: | | | |
| Date: | | | |
| Times: | | | |
| Location:_ | | | |
| Job Function | on: | | |
| and should | obtain community service credi | t for participating. | |
| Supervisor | at Volunteer Site- Title | Phone nu | mber |
| Supervisor | Email address | | |