



Deerfield-Windsor School
Order of the Round Table
Volunteer Documentation Sheet

Name of Student _____

Name of Organization Served _____

Description of Project/Services

Date(s) of Service _____

Total Number of Hours _____

I hereby verify the above information to be accurate and true.

Student's signature _____

Parent's signature _____

Signature of Organization Official _____

Title of Official _____ Phone number _____