VOLUNTEER / COMMUNITY SERVICE FORM

Student's name _____ ID _____

Graduation yr. _____

(USE INK ONLY)

Date MM/DD/YY	Type of Community Service	Where Community Service Was Done	Hours Completed	Initialed by Supervisor

I, _____, pledge that the hours listed above are true and correct. I also affirm that I did not receive payment for any of these community service hours, and no hours were accrued under court-mandated terms.

_____

Student's signature Date