



Tippecanoe School Corporation Service Verification Letter



To Whom It May Concern:

Please accept this letter as confirmation that the student listed below has been a participant for a **minimum of 75 hours**.

Student Name: _____

Date(s) Participated: _____ Organization/Group: _____

Position(s) Held by Student: _____

Student Job Duties: _____

Contact Name: _____

Phone Number/Email: _____

Is/Was this student actively engaged? Yes No
Do you believe this student has employability skills? Yes No
If you were hiring, would you hire this student? Yes No

In the event you should have any questions or need additional information, please contact us.

Signature: _____

Title: _____

Date: _____