## Onslow Early College High School Community Service Verification Form

|               | Agency:  Type of Work Performed by Student: |      |      |      |      |      |      |      |       |            |    |    |    |    |    | Phone Number: |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
|---------------|---|------|------|------|------|------|------|------|-------|------------|----|----|----|----|----|---------------|----|----|----|----|----|----|----|------|-----|------|-----|-----|----|----|----|-----------------|
| Loca          | tio   | n of | Wo   | rk P | erfo | rmeo | d by | Stu  | dent  | :          |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Date<br>Month | 1   | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9     | 10         | 11 | 12 | 13 | 14 | 15 | 16            | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24   | 25  | 26   | 27  | 28  | 29 | 30 | 31 | al<br>Ho<br>urs |
| Jan           |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Feb           |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Mar           |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| April         |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| May           |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| June          |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| July          |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Aug           |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Sept          |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Oct           |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Nov           |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Dec           |   |      |      |      |      |      |      |      |       |            |    |    |    |    |    |               |    |    |    |    |    |    |    |      |     |      |     |     |    |    |    |                 |
| Dec<br>Prir   | nt N  | Nan  | ne o | f ag | enc  | y re | pre  | sent | tativ | 7 <b>e</b> |    |    |    |    |    |               |    |    |    |    |    |    | T  | elep | hor | ne N | uml | ber |    |    |    | _               |