

Community Volunteerism Experience Verification Form

Submit this form after completing the community service experience. Include a one-page summary of the experience. In the summary, address these questions: 1) What were the duties of your volunteer role? 2) Why did you choose this particular activity to satisfy the volunteerism requirement? 3) What did you learn from your volunteer work?

Student Name	Class of	Today's Date
Agency / Organization and Address		
Supervisor Name <i>(May not be parent, guardian, or relative)</i>		Supervisor Title and Phone Number
Dates Worked		
From	To	Total Number of Hours Worked
Brief Description of Community Service Activity		
<i>I verify that the above-named student worked the number of hours stated in a voluntary, non-paid capacity.</i>		
Supervisor Signature		Date
Student Signature		Date

Return this form to
Mr. Gary Grahl or Mrs. Jennifer O'Handley
Sturgeon Bay High School
1230 Michigan Street
Sturgeon Bay, WI 54235
920.746.2800