

BELMONT HIGH SCHOOL COMMUNITY SERVICE PROGRAM

Verification Form

1. STUDENT INFORMATION

Student Name \_\_\_\_\_ YOG \_\_\_\_\_ Counselor \_\_\_\_\_

Placement Organization \_\_\_\_\_

Description of Service Activity \_\_\_\_\_

Supervisor's Name & Phone No./email \_\_\_\_\_

Date(s) of Service \_\_\_\_\_

Total Number of Hours \_\_\_\_\_

2. STUDENT JOURNAL

WRITE A *REFLECTIVE* JOURNAL ENTRY (on the reverse side) about your service project. Please don't write what you did. Think about the big picture. Suggestions: What impact did your service have on others? What impact did it have on you? What did you learn? Would you recommend this activity to others? Why or why not?

3. VERIFICATION

I certify that the above-named student has performed the number of community service hours indicated above without compensation.

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor's Comments (Optional):

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

COMPLETE THIS FORM (*front & back*) & RETURN to Community Service Coordinator in the Social Studies Office, *preferably* within 2 months of completion of service.

OVER

# STUDENT JOURNAL