



Oswego East High School

Student ID _____

Graduation Year _____

SERVICE HOURS VERIFICATION FORM

_____ has completed _____ hours of Voluntary Community Service
(Student Name)

at _____ for _____
(Location) (Description of Work)

Date(s) of Service *MM/DD/YY*: _____

Signature of Site Supervisor

Comments: _____

Print Name of Site Supervisor

Telephone Number

*Students need **150 hours** to receive the Community Service Award

Revised 3/10/15 lk



Oswego East High School

Student ID _____

Graduation Year _____

SERVICE HOURS VERIFICATION FORM

_____ has completed _____ hours of Voluntary Community Service
(Student Name)

at _____ for _____
(Location) (Description of Work)

Date(s) of Service *MM/DD/YY*: _____

Signature of Site Supervisor

Comments: _____

Print Name of Site Supervisor

Telephone Number

*Students need **150 hours** to receive the Community Service Award

Revised 3/10/15 lk