Acalanes High School Volunteer Service Award Application Summary Page 2016-2017

Volunteer Infor	<u>mation</u>					
Formal Name:						
Name to print on (Certificate (if different):					
Volunteer email:			Phone#:Phone#:			
Parent email:						
Birthdate:	Grade:	U.S. Citizen or L	egal Resident: Yes	No		
SUMMARY - Serv	rice Hour Totals					
1. Complete this su	ummary page once and at	tach a signed Verification	Form for each organiz	zation/activity.		
2. Service dates m	ust not exceed a 12-mont	h period and must not over	rlap with dates from p	rior year award.		
	C	ny student that is 16 years + year old category for ser	<i>J</i> 1	int during their		
Organization	Service Description	Dates Served	Hours (<16yrs)	Hours (16+ yrs)		
		_				
TOTALS	Start Date:	_ End Date:	_			
FOR OFFICE U	JSE ONLY					
Start Date of Servi	ce:	End Date of Ser	vice:			
Prior Year Award	(Y/N) I	End date of prior year av	vard:			
		Award Earned				
Reviewed by:						

RETURN COMPLETED FORMS TO COLLEGE & CAREER CENTER FROM APRIL 10 - APRIL 14, 2017

Acalanes High School Volunteer Service Award Verification Form 2016-2017

INSTRUCTIONS:

- 1) Complete this Verification Form for each organization served.
- 2) For service duration more than 1 week, be sure to complete a daily log. If daily log does not fit on the form, attach a separate daily log. Some service organizations provide timecard detail that is sufficient.
- 3) Collect all Verification Forms for each organization and attach to the Service Award Application Summary Page
- 4) RETURN COMPLETED FORMS TO COLLEGE & CAREER CENTER FROM APRIL 10-14, 2017.

<u>Service Hours Verification</u>	<u> </u>	es, use additional verification forms
Student Name:		
Number of active volunteer ho	urs completed:	
Dates of Volunteer Service: fr For time periods greater than 1 we	omto ek, including daily hour detail on t	this form or in an attachment
Age when volunteering during	this time period: Under age	e 16 Age 16 and over
Organization Served:		
Organization or Facility Addr	ess:	
Organization Phone Number:	ema	ail:
Describe volunteer work perfo	rmed:	
completed within 1 week. If this Date	space is insufficient, attach a d Service Description	aily log. Hours Served
verifying Supervisor (print) _		(signature)

Note to Supervisors:

- Only certify **ACTIVE VOLUNTEER HOURS** for overnight trips (e.g., mission trips, 5th grade camps).
- Attach verifying supervisor's business card if available.
- A student's parent may not verify their own child's hours. Another representative's signature is required.