



**PALO ALTO HIGH SCHOOL COMMUNITY SERVICE HOURS VERIFICATION FORM**  
*Use a separate form for each organization. Once complete, upload to your Google Folder and keep originals for your record*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Email \_\_\_\_\_ Grade \_\_\_\_\_ Class of 20 \_\_\_\_\_  
 Address \_\_\_\_\_  
 Name of Organization (no abbreviations) \_\_\_\_\_  
 Organization Email and/or Phone Number \_\_\_\_\_  
 Organization Address \_\_\_\_\_

Date	Description of activity	Hours

Starting date of service at this organization: \_\_\_\_\_ Ending date: \_\_\_\_\_

Total hours served at this organization: \_\_\_\_\_

(If you volunteered 100+ hours at this organization, you need a director’s letter on the organization letterhead or be from organization’s official email, including dates that you served and total hours that you served.)

Printed Name of Site Manager (must be over 21) \_\_\_\_\_

Signature of Site Manager \_\_\_\_\_ Date \_\_\_\_\_

I hereby certify that all of the information on this document and President’s Award Application is accurate and true.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_