

North Wildwood, NJ 08260 609-522-2709

## <u>Verification of service provided – 2017 through 2018 Confirmation</u>

This form must be signed by the director of the service project. It may not be signed by the participant's school or guidance department. Service should not be rendered to the participant's school but to a not-for-profit organization.

Name of student:	Grade
Name of Facility service rendered:	
Address of Facility service rendered:	
Number of hours served	Date of Service:
Brief description of the service offered:	
Signature of Facility Supervisor:	
Date:	
Student Signature:	
Date:	
**********	**************
For office use: Grade	Date turned in