

## Community Service Verification Form

**NEWPORT HARBOR HIGH SCHOOL**  
**600 Irvine Ave.**  
**Newport Beach, Calif. 92663**

Name: \_\_\_\_\_ Student ID \_\_\_\_\_ Grade: 9 10 11 12  
*(Print Name)* *(Circle One)*

Organization and/or Project Served: \_\_\_\_\_

Location: \_\_\_\_\_

Service Date(s):	Number of hours:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**TOTAL COMPLETED HOURS** \_\_\_\_\_

This form can be used for multiple dates as long as it is from the same organization/supervisor.

**As supervisor of this project, I verify that the above information is correct.**

\_\_\_\_\_  
*(Print Name of Supervisor)* *(Telephone Number)*

\_\_\_\_\_  
*(Signature of Supervisor)*

**Student: Please fill in the following prior to turning in form.**

*Describe service you performed and how it benefited our community.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Turn form in to the Counseling Office within 30 days of the completion of your service.**

