

KENNETT HIGH SCHOOL

GRADUATION PROJECT

Community Service Verification Form

Student Name: _____

Year of Graduation: _____

Project Advisor: _____

Describe the type of community service in which the student participated.

Number of Community Service Hours: _____

Name of Company/Organization: _____

Address: _____

Phone Number and/or e-mail Address: _____

Name of Contact Person: _____

Title of Contact Person: _____

I, _____, certify that the above named
Kennett High School student has completed community service with my
organization.

Signature

Date