

Pacific Grove High School: Community Service Verification Form

Student Name _____ Class of 20 _____

Name of Organization Served _____

Description of Service Performed (what you did) _____

Date(s) of Service _____ Total Hours Worked _____

Your Supervisor's Name (print) _____

Supervisor's Phone _____ Supervisor's Email _____

> I certify that this student has completed the community service listed above:

Signature of Supervisor _____

(Supervisor cannot be a parent, immediate family member, or current PGHS student)