

SILVER CORD
VERIFICATION FORM

Student Name: _____

Graduation Year: _____

Date of Activity: _____

Volunteer Activity: _____

What did you learn or gain from this service activity?

Student Signature

MUST BE COMPLETED BY COMMUNITY MEMBER. Student may not complete this portion.

I verify that _____ volunteered for _____
(student name) (# of hours)

hours. During this time the student _____
(type of tasks)

(community member signature)

(printed name)

Date: _____

See back for more Silver Cord information.