



*HLV High School
Silver Cord Service Program*

*Verification of Service
Form*



Please complete and hand in this form for us to count your service hours:
Forms may be handed in at the HLV main office or given to Mrs. Long

To be completed by STUDENT:

Student Name _____ Graduation Year _____
Date(s) of Service _____ Number of hours served _____
***If serving multiple times in the same location, please fill out the "Log of
Volunteer Hours" and staple it to this form when filled out.***

To be completed by COMMUNITY MEMBER:

I verify that _____ volunteered for _____ hours.
Student name # of hours

During this time the student _____
Description of task

Community Member's Signature Print name Date

Reflection to be completed by STUDENT:

Write a brief description of this service activity by answering the following:
Explain what you did: _____

Whom did you serve? _____
How do you think you impacted the lives of those you served? _____

What did you gain personally from those you served? _____

How did this service experience challenge you? _____