PVSA and SHS VOLUNTEER SERVICE AWARD

RECORD OF SERVICE FORM

Hours Served During the Award Period 4/16/20 - 4/15/21

Student Name: _____ Birthdate: _____

Cell Phone: _____ Email Address: _____

Date	Name of Organization	Description of Volunteer Work	#Hours	Supervisor Name & Email

Student Signature _____ Total # Hours _____ Page _____ of _____