COMMUNITY SERVICE VERIFICATION FORM

Washington Waldorf high school students are required to perform a minimum number of community service hours with non-profit 501(c)(3) organizations annually

STUDENT NAME: _____ SCHOOL YEAR: _____

Service for a school year must be performed between the first day of Summer vacation and the last day of school.

ORGANIZATION NAME: _____

ORGANIZATION ADDRESS: _____

ORGANIZATION WEBSITE: _____

DESCRIPTION OF SERVICE: _____

HOURS WORKED - The school will credit a maximum of 10 hours per day.

Date	Hours worked Date	Hours worked
	TOTAL THIS FORM:	

I certify that the student named above performed service for the organization identified above, and as reported on this form. The student was not paid in any form, is not receiving academic credit, and did not perform this service to satisfy a membership requirement (if they are a member of the organization). The organization is certified 501(c)(3) by the IRS. I am an authorized representative of the organization.

SIGNATURE: _____ Date: _____

Printed Name & Title: _____

Phone number and/or email address: _____

—→Return form to Registrar: registrar@washingtonwaldorf.org or fax to 202-517-6449

WASHINGTON WALDORF SCHOOL, 4800 SANGAMORE RD, BETHESDA MD 20816