



SDMC Verification Form for Community/Volunteer Service/Paid Work

This form must be completed, and all signatures obtained prior to starting a volunteer service/work project.

KEEP COPIES FOR YOUR RECORDS

Student Name:	Grade:	School:
Title of Project/Job:	Sponsoring Club/Organization/Company:	
Project/Work Supervisor Name:	Supervisor's Phone Number:	

Social Issue Being Addressed (Select one):

- Preservation of environment and protection of historical sites
- Promotion of health, welfare, and safety in our community
- Improvement of standard of living for residents of our community
- Encouragement of the growth of arts in our community
- Improvement and enrichment of the lives of the mentally and physically disabled of our community
- Promotion of a quality of life for the senior citizens of our community
- Provision of leadership, guidance, and activities for the youth of our community
- Promoting animal welfare
- Promoting literacy
- Improving and enriching the lives of homeless and/or those living in poverty
- Area of interest for future career/profession

IB Students Only	Please select one:	Creativity	Action	Service
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Description of Community Service/Work Project : Identify activities/work that will be done as a part of this project/work and how it will address the issue selected above.

Student Signature

Parent Signature

Service Project/Work Supervisor Signature

Volunteer Service Coordinator Signature

Volunteer Service Coordinator Use Only

Date Verification form received: _____

Date request ___ Approved/___ Denied: _____