CHEER Community Service Verification Form (Group/Family)

**This form is to verify that the individuals named below have completed volunteer community service for a non-profit organization. Please list just the name and hours completed by each individual. When submitting please include all relevant forms to certify hours completed by each individual.**

**Group Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

| **Group Activity Summary:** |
| --- |

| **Full name of individual** | **Email** | **Hours completed** |
| --- | --- | --- |
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|  | **Total Hours** |  |

**To be completed by a CHEER Advisor:**

**Name of CHEER Advisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**To be completed by representative of group submitting on behalf of group**

**Group/Family Leader Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**