

Name \_\_\_\_\_  
Advisor \_\_\_\_\_  
Grade \_\_\_\_\_

## Andrews Osborne Academy Community Service Program

Please complete and return your verification form to the Registrar's office.

Date of Service \_\_\_\_\_ Hours Completed \_\_\_\_\_

Name of Organization \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_ Supervisor's e-mail \_\_\_\_\_

Supervisor's Name (please print) \_\_\_\_\_ Supervisor's Phone \_\_\_\_\_

**Please answer the following questions completely.**

1. Briefly describe your volunteer experience (what did you do?)

2. How did your service benefit the community or organization your served?

3. What impact has this service had on you?

*"One drop of water helps to swell the ocean; a spark of fire helps to give light to the world. None are too small, too feeble, too poor to be of service. Think of this and act."*  
Hannah Moore

