



Community Service Judicial Affairs Verification Form

Direction: This form must be completed prior to starting any community service. This must be approved by the Interim Director of Judicial Affairs.

Activity 1: _____	Overseer Approval: _____
Sponsor: _____	Sponsor Phone Number: _____
Date Started (mm/dd/yy): _____	Date Finished (mm/dd/yy): _____
Sponsor Signature: _____	TOTAL HOURS COMPLETED: _____

Activity 2: _____	Overseer Approval: _____
Sponsor: _____	Sponsor Phone Number: _____
Date Started (mm/dd/yy): _____	Date Finished (mm/dd/yy): _____
Sponsor Signature: _____	TOTAL HOURS COMPLETED: _____

Activity 3: _____	Overseer Approval: _____
Sponsor: _____	Sponsor Phone Number: _____
Date Started (mm/dd/yy): _____	Date Finished (mm/dd/yy): _____
Sponsor Signature: _____	TOTAL HOURS COMPLETED: _____

Student Signature: _____	Date Submitted: _____
Parent Signature (if applicable): _____	Total Worked: _____

SUBMIT THIS FORM TO Office of Judicial affairs, azalea building, 1st floor (office on right)