Alpha Gamma Sigma
West Valley College

COMMUNITY SERVICE VERIFICATION FORM

After completing this form, submit it to the Points Secretary before all points are due for the semester.

Student Name: _____ **WVC ID#**: _____

The undersigned hereby verifies that the above referenced student has contributed _____ hours of community service to the following organization:

Name of Service Organization: _____

Event and/or Duties Performed: _____

_____

Dates Service Was Provided: _____

Verified by:

_____

Signature Print Name Title

_____ (____) _____

Company/Group Name Phone Number Date