ALGONA HIGH SCHOOL SILVER CORD SERVICE PROGRAM
VERIFICATION OF SERVICE FORM

To be completed by STUDENT and **verified by COMMUNITY MEMBER:**

Student's Name: _____

Date(s) of service: _____

Number of hours worked: _____
___Yes ___No These hours counted for Leadership Class, Peer Helping, or Eagle Scout badge **(A limit of 10 hours from each of these activities may be applied toward the Silver Cord)**

I verify that this student completed the hours listed above by volunteering to/as:

_____
(Type of Task/Activity)

_____ _____
(Community Member's Signature) (Date)

STUDENT: Describe the service activity in detail by answering the questions below.

1. What were the steps you took to prepare for and participate in this activity?

2. What did you do? What was your role in this activity? Did you contribute monetarily?

(Please turn over to answer additional questions!)

3. Who benefited from this service activity and how did they benefit? (individuals, groups, the community in general?)

4. Describe what you, yourself, got out of your project. What did you learn? Did you acquire any new skills? What was the most memorable part of this activity?