



**GREENSBURG CENTRAL CATHOLIC JUNIOR SENIOR HIGH SCHOOL**

**STUDENT SERVICE PROJECT VERIFICATION FORM**

**STUDENT NAME:** \_\_\_\_\_ **Grade** \_\_\_\_\_

Place of Service: \_\_\_\_\_

Description of Service: \_\_\_\_\_

Date/Time of Service: \_\_\_\_\_

Service Hours credited: \_\_\_\_\_

**Parent signature:** \_\_\_\_\_ **Supervisor's signature:** \_\_\_\_\_

Phone number: \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor's comment:**



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