

Volunteer Verification Form for Silver Cord Recognition Program

Student Name \_\_\_\_\_

Dodger Time Advisor \_\_\_\_\_

Date of Volunteer service \_\_\_\_\_ Hours of Volunteer Service \_\_\_\_\_

Contact & Organization \_\_\_\_\_

Description of volunteer service performed:

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Committee Decision based on criteria and description given:

Approved                      Denied

Justification for decision:

Principal appeal:

Approved                      Disallowed

Justification for decision: