



Volunteer Verification Form

Alpha Phi Sigma, the National Criminal Justice Honors Society ASU Chapter

Instructions: Please fill out the below information on the form by typing or writing it. **Illegible, incomplete and unsigned forms will not be accepted.** Please note that in person students MUST complete a minimum of 9 community service hours and online/out-of-state students must complete a minimum of 6 community service hours. Forms should only be emailed to alphaphisigma.asu@gmail.com

Name: _____

Address: _____

City, State, and Zip code: _____

Phone Number: _____

In person (ground) student

Online/out-of-state student

Name of Agency: _____

Agency Address: _____

City, State, and Zip code: _____

Agency Phone Number: _____

Date(s) of community service: _____

Signature: _____

Date: _____

Volunteer Date	Activity	Number of Hours

****To be filled out by volunteer manager/supervisor****

Name: _____

Phone Number: _____

Total hours student spent volunteering: _____

Signature: _____

Date: _____

For office use only:

Current semester:	Continuing or graduating student:	Volunteer hours confirmed:	Initials:	Date:
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