SUMMARY PAGE

2023-2024 Moraga School District Volunteer Service Award Application

STUDENT VOLUNTEER INFORMATION

Full Name:		Birthdate:						
Name to print on Certificate (if different):				Grade:				
Parent email:				Phone #:				
SUMMARY OF SERVICE HOUF	RS							
1. Complete this Summary	Page once	and attac	ch a signe	d Verificati	ion Form for EACH organization or activity.			
	-		_		erlap with dates from prior year award.			
3. Service award levels are		-			• •			
Organization	Hours K - 5	Hours 6 - 8	Start Date	End Date	Service Description			
TOTAL # OF HOURS			START D	ATE:	END DATE:			
Award Qualification Questions	s: (circle Ye:	s or No)						
1. All of my hours are active	e service ho	urs and d	o not inclu	ıde general	meetings: Yes No			
2. None of my hours were f	or pay, scho	ool credit o	or court or	dered servi	ice: Yes No			
3. I am a U.S. Citizen or Le			No					
	-		nteer Serv	vice Award;	not required for MSD Award			
3 7					,			
FOR OFFICE USE ONLY								
Reviewed by:				Year Award (Y/N)				
Start Date of Service:				End Date of Service:				
Grade: Hours:				_ Award Earned:				

VERIFICATION FORM

2023-2024 Moraga School District Volunteer Service Award Application

Instructions:

- 1) Review Information Sheet available on http://www.moraga.k12.ca.us/pvsa
- 2) Complete this **Verification Form** for **EACH** organization served. Attach completed **Verification Form(s)** to the **Summary Page**.
- 3) For service duration more than one (1) week, be sure to complete a daily log. If the daily log does not fit on the form, attach a separate daily log. Some service organizations provide timecard detail that is sufficient.
- 4) Turn in all completed forms to the school office on or before Friday, April 12, 2024.

	tion – For multiple service activities, use additional dent Name:			
	vice: fromto _			
	an one (1) week, include a daily log with date and hours in the			
Organization Served: _	y during this time period: (circle one) Grades K-5 y Address:			
	or Phone Number: Email:			
	rk performed:			
,	riods greater than 1 week, include log of hours by day. A hin one (1) week. If this space is insufficient, attach a da	, ,	is not	
Date(s)	Service Description		lours K - 5	Hours 6 - 8
TOTAL # OF HOURS _				
Verifying Supervisor (p	orint) (signature)			

Note to Supervisor: Only verify active volunteer hours. See Information Sheet for approved volunteer activity qualifications. Attach verifying supervisor's business card if available.

The student's parent may not verify their own child's hours. Another representative's signature is required.