Silver Cord Completion Form

*Lancer Pride*


# Loyalsock Township High School

*Return to the Main Office*

Please complete and return this form once you have completed the volunteer activity with the organization. This form will be kept on file with the program coordinator.

**A different form must be completed for EACH volunteer activity.**

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| --- |
| General Information |
| Student Name:       | School Year:       |
| Select the Categories Within Which this Opportunity Falls:[ ]  Community Agency [ ]  Church or Religious Organization [ ]  School or Educational Agency[ ]  Parks and Recreation [ ]  Nonprofit Charity Organization [ ]  Community Events Planning[ ]  Non Relative Senior Citizen Assistance [ ]  Other |
| Volunteer Activity Description:      | Volunteer Site Supervisor:      |
| Volunteer Site Address:      |
| Volunteer Site Email:      |
| Volunteer Site Telephone:      |
| How were you helpful to others?      |
| What did you gain from this experience?      |
| Volunteer Site Approval |
| *I certify that the above individual has completed the hours listed above in good standing.* | Signature of Volunteer Site Supervisor: | Today’s Date: |

*Revised August 2011*