



UNITED WAY VARSITY LETTER IN COMMUNITY SERVICE

STUDENT SERVICE TRACKING FORM (DUPLICATE AS NEEDED)

Date	Name of organization	Description of work/project	United Way focused hours? (yes / no)	Total time	Supervisor signature

STUDENT SERVICE TRACKING FORM (CONTINUED)

Date	Name of organization	Description of work/project	United Way focused hours? (yes / no)	Total time	Supervisor signature

FINAL TALLY OF VOLUNTEER HOURS

Please complete this portion of the form **at the end of the school year**. Return this along with completed tracking form(s) to Rose.Twombly@UnitedWayNNJ.org

Total number of hours served doing United Way aligned work (minimum 30 hours)_____

Total number of hours served doing school-related activities (minimum of one activity)_____

Total number of hours served elsewhere (i.e. 501(c)3 nonprofit agency, governmental entity, school organization)_____

Add the numbers above and provide the total number of hours served between July 1, 2019 and June 30, 2020 (minimum of 120 hours)_____

STUDENT AGREEMENT

I attest that I performed the documented hours of community service indicated on this form. I also attest that I met all of the qualifications as outlined by United Way of Northern New Jersey. To my knowledge, these hours are valid and count toward the Varsity Letter in Community Service.

Student signature

Date