

McDowell High School Honors College Verification Form



🗆 5 Add	litional Hours of Community Service	
	9th Grade – Youth or Youth Programs	
	10th Grade – School or Community	
	11th Grade –Living/Working in Poverty	
	12th Grade – Sick or Elderly	

Student Name:	Grade:Total Hours:	
Organization / Place of Service:		
Date(s) of Service:		
Event Name (if applicable):		
Supervisor's Name (print):	Phone Number:	
Supervisor's Email:		

(Supervisor's Signature)(Student's Signature)Note: The supervisor may not be a parent or guardian.

(Date)