# Office of Community Standards

**3399 North Road, Poughkeepsie, New York 12601**
**(845) 575- 3514**

**Community Service Validation Form**

Students Name: _____Date Assigned: _____

Number of hours assigned: _____Date to be completed: _____

Student Signature: _____Date_____

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Community Service site address: _____

Service activity synopsis:

_____

_____

_____

_____

Supervisor: _____

Phone/Ext: _____Number of Hours Completed: _____

Dates of Service: _____

Signature of Supervisor: _____ Date: _____

*Signature validates student has actively engaged in a legitimate Community Service project for which he/she was supervised. The Office of Community Standards maintains the right to contact and authenticate all community service projects and assignments. Fellow students and/or family members are restricted from signing off on studentôs hours and fraudulent service claims will result in additional conduct charges.