



# SOAR Academy

## Community Service Verification Form

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Tier Level: \_\_\_\_\_

Date Photo Sent to Gmail: \_\_\_\_\_

| Date of Service | Start/End Time | # of Hours Served | Please describe what the student did for you while working at your location |
|-----------------|----------------|-------------------|---|
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**SOAR Academy students must provide proof that they performed community service.**

If our student has completed service time for you, please provide a name and phone number that SOAR Academy can call to confirm that the above student has completed the community service work described.

**Contact Person:** \_\_\_\_\_  
 (Please Print) (Signature)

**Phone # to Call to Verify Service:** \_\_\_\_\_

If you have questions about SOAR Academy Community Service, please contact one of the SOAR Academy staff members listed below:

**Amy Thomas 843-488-7500 Ext 242223 athomas001@horrycountyschools.net**

**Heather Van Dyke 843-488-7500 Ext 243214 hvandyke@horrycountyschools.net**