



# GOLD RIVER SECONDARY SCHOOL

## Passport to Education

201 Muchalat Drive, Box 700, Gold River, B. C. V0P 1G0  
Tel. (250)283-2538 Fax (250)283-7158

### Confirmation of Community Service

(can be an official volunteer position or arranged privately)

I would like to confirm that \_\_\_\_\_ has completed \_\_\_\_\_ hours of  
Service in the community.

Event: \_\_\_\_\_

Organization / Business name: \_\_\_\_\_

The specific job or duty performed in/for the community was: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The activity was completed on, or between the following dates: \_\_\_\_\_ - \_\_\_\_\_

Name of Supervising adult: \_\_\_\_\_

Contact Phone number of supervisor: \_\_\_\_\_

Performance comments (optional): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_