

# GIFT – President Volunteer Service Award Application

## Summary Page

(To be filled in at the end of Award Year)

### VOLUNTEER INFORMATION

Full Name: Darsahnya Jeyendiran Arumugam

Birthdate: 04/16/2009

Grade: 10

Parent email: smenakha@gmail.com

Phone#: 5109510115

Award Period Start Date: 9/15/2024

Award Period End Date:

### SUMMARY OF SERVICE HOURS

Complete this Summary Page once and attach a signed Verification Form for each organization or activity. Service dates are within the 12-month Award period and must not overlap with dates from prior year awards.

Organization	Service Start Date	Service End Date	Service Description
			Total hours:

### AWARD QUALIFICATIONS QUESTION: (circle Yes or No)

1. All of my hours are active service hours and do not include general meetings: Yes No
2. None of my hours were for pay, school credit or court ordered service: Yes No
3. I am a U.S. Citizen or Legal Resident: Yes No

### FOR OFFICE USE ONLY

Reviewed by:

Award Period Start Date:

Award Period End Date:

Hours:

Award Earned:

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## Application

### Verification Form

**Instructions:**

- 1) Review Information Sheet available on <https://docs.google.com/document/d/1I8Y6PKUfmtj6LtCPAB-hMCgQTSICrzig2/edit?rtpof=true>
- 2) Complete this Verification Form for each organization served. Attach completed Verification Form(s) to the Summary Page.
- 3) Be sure to complete a time log with description of service/task performed. Some service organizations provide timecards or confirmation via email – which can be attached as well as supporting reference
- 4) Turn in all completed forms to hopeavenue@gmail and also slack message Natalie Sarnier with the verification forms.

Student Name:

Age when volunteering:

Organization Served:

Organization or Facility Address:

Organization/Supervisor Phone Number:

Supervisor email:

Describe volunteer work performed:

**Time Log**

Date(s)	Service/Volunteer activity/Task Description	Number of Hours
<b>Total Hours</b>		

**Verifying Supervisor Name:**

**Signature:**

Note to Supervisor: **Only verify active volunteer hours.** See Information Sheet for approved volunteer activity qualifications.

Attach verifying supervisor’s business card if available.

The student’s parents may not verify their own child’s hours. Another representative’s signature is required.