

KITSILANO SECONDARY SCHOOL

2706 Trafalgar Street Vancouver, B.C. V6K 2J6 Telephone: 604-713-8960 • Fax: 604-713-8960

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.		
Organization / Business name:		
The specific job or duty performed in/for the community was:	·	
The activity was completed on, or between the following date	s:	
Name of Supervising adult:	_	
Contact phone number of Supervisor:	_	
Performance comments (optional):		
Signatura		