



Tampa Catholic High School
Accredited by AdvancED Worldwide

This letter serves as documentation for service performed.

Description of service performed:

Student Name: _____

Student Signature: _____ Date: _____

Total Community Service hours: _____

Date service completed: _____

Name of non-profit organization: _____

I verify that the above named student has completed the indicated number of community service hours.

Name of Supervisor: _____

Email of Supervisor: _____

Supervisor Signature: _____

Thank you,

Ty Griffin
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Asst. Dean of Students
Tampa Catholic High School