INSPIRE National Community Service Award

NAME _____ DIVISION _____

Organization	Service or Volunteer Work	Date Volunteered	Hours Volunteered

AFFIDAVIT

I declare that to the best of my knowledge and belief, the information herein is true and correct.
I declare and affirm that I fully and actively participated in all activities listed herein, and that I stayed for the duration of the event.

SUBTOTAL HOURS (this page) _____

Page ____ **of** ____

Signature _____
Delegate or Parent (if delegate is a minor)

GRAND TOTAL HOURS _____
from all pages submitted

Date _____