



9535 International Court N.  
St. Petersburg, FL 33716  
727-568-9333 (tel)  
727-568-0533 (fax)  
[www.communitytampabay.org](http://www.communitytampabay.org)

Dear (community partner),

**We are writing to request your assistance in verifying that \_\_\_\_\_ (youth volunteer name) has been actively involved in service through your organization. Please complete and return the attached Community Service Verification form on behalf of \_\_\_\_\_ (youth volunteer name).**

The information we obtain will assist us in developing youth who are committed to action through service in their community. It will inform our curriculum, volunteer training, youth development model and outreach strategies. Please take a moment to fill out the attached form and return to our office by \_\_\_\_\_ (desired due date).

I want to thank you in advance for making the time to help us create more just and inclusive communities through the empowerment of our youth. You may fax or mail the form to Community Tampa Bay. If you have any questions or concerns please feel free to call me at 727-568-9333 or email [jestevez@nccjtampabay.org](mailto:jestevez@nccjtampabay.org).

Yours in service and education,

Jessica Estévez, M.M.  
Director of Programs





### Community Service Verification

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**General Information regarding youth volunteer**

Name \_\_\_\_\_ Date attended Anytown \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**Please have a community service representative verify service for the youth named above by filling out the form below.**

Name of service activity: \_\_\_\_\_

“I (print name of verifier) \_\_\_\_\_ certify that (print first and last name of volunteer) \_\_\_\_\_ participated in the above mentioned activity for (name of the organization) \_\_\_\_\_

from (date) to (date). The youth volunteer’s role and responsibilities were (describe volunteer responsibilities or role of youth volunteer) \_\_\_\_\_

Signature of person verifying community service: \_\_\_\_\_

Verifier’s title: \_\_\_\_\_ Phone: \_\_\_\_\_

Please include other supporting data for the event (agency brochure, event flyer, etc)

**RETURN TO COMMUNITY TAMPA BAY**