

Community Service Verification Letter

Date: [Insert Date]

[Your Organization's Letterhead]

[Organization Name]

[Organization Address]

[City, State, Zip Code]

[Phone Number]

[Email Address]

To Whom It May Concern,

This letter serves to verify that [Participant's Name] has successfully completed [Number of Hours] hours of community service with [Organization Name] as part of their service-learning program.

During the period of [Start Date] to [End Date], [Participant's Name] participated in various activities including [briefly list activities or projects]. Their contributions have had a positive impact on our community, and we appreciate their commitment and dedication.

If you require any further information or clarification, please feel free to contact us at [Phone Number] or [Email Address].

Sincerely,

[Your Name]

[Your Title]

[Organization Name]