Jindal OutREACH Approved Partner Volunteer Hour Verification Form

This form may be used to verify hours worked with APPROVED PARTNERS ONLY. A full list of approved community partners can be found on the Jindal OutREACH website. Opportunities with these approved partners do not need to be pre-approved. Verification forms can be submitted for tracking via the Jindal OutREACH website. All fields must be complete. Forms must be submitted within 30 days of service.

Student Name: ________________________________________________________ UTD ID #: _____________________________

Student UTD Email: ________________________________________________________@ UTDallas.edu

Organization Name: _______________________________________________________

Event Name (if applicable): __________________________________________________

Duties/ Description of Service Rendered: ________________________________

________________________________________________________________________

Date(s): _________________________________________________________________

Start Time: __________________________ End Time: __________________________

Total Hours Worked: __________________________

A valid start and end time must be provided for each date. If necessary, an additional sheet may be included if signed by supervisor.

Supervisor Statement : I verify that the above information is correct, and that the student did not receive any compensation for their efforts. I have included accurate contact information below in case additional verification is necessary.

Supervisor’s Name (please print): __________________________________________

Supervisor’s role in organization: __________________________________________

Supervisor’s email: ______________________________________ Phone: __________________________

Supervisor Signature: __________________________________ Date: ________________

For Jindal OutREACH Office Use Only:

Date Submitted: __________________________ Approved [ ] Denied [ ]

Approved by: ______________________________________________________________________

If Denied, please list why: ______________________________________________________________________