

**Kappa Epsilon Zeta Scholarship Fund 501(c)3**  
**2024 Scholarship Application**  
**Community Service Verification Form**

To: Kappa Epsilon Zeta Scholarship Fund

Re: Verification of Community Service performed

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This letter is to verify that \_\_\_\_\_ completed \_\_\_\_\_ hours as a volunteer for  
(Student's Name)

\_\_\_\_\_ on the following date(s):  
(Organization/Agency Name)

at \_\_\_\_\_  
(Location/Address)

Description of type and quality of community service performed:

Name of agency/service recipient: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

\_\_\_\_\_  
Supervisor at Volunteer Site and Title

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Supervisor Email address

**Kappa Epsilon Zeta Scholarship Fund**  
**3010 Eastchester Road**  
**Suite 709**  
**Bronx, NY 10469**