

Kappa Epsilon Zeta Scholarship Fund 501(c)3
2025 Scholarship Application
Community Service Verification Form

To: Kappa Epsilon Zeta Scholarship Fund

Re: Verification of Community Service performed

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