



Student Service Record Certificate Request Form

| Student Name: |
|--|
| Date: |
| Email Address: |
| Phone Number: |
| |
| Will you be exiting the program or will you continue to log hours? (type a "Y" in the box you want to select) |
| Continue to Log |
| Exit Program |
| The service sites you have logged hours with will appear on your certificate. You will receive a draft of your certificate via email to approve before we prin |
| Once you approve your certificate draft, please allow up to two weeks for your request to be completed. |
| (to insert your signature click on the text fields below and select the Insert tab → Auto Text → Signature) |
| ET staff use only: |
| Date Received: |
| Time Received: |
| Staff Name: |
| SR Intern use only: |
| Date Draft Sent: |
| Date Participant Approved: |

