



COMMUNITY SERVICE TESTIMONY FORM (Form No. HAA-05)

TO THE RATER

*The student named below is being nominated for a graduation award. In this connection, please accomplish this Community Service Testimony Form to assess the nominee's involvement in and contribution to community outreach projects. Once accomplished, please return the form to the nominee in the envelope provided. Please **seal and sign** across the envelope flap. If you do not have sufficient information about the applicant in order for you to objectively rate his/her performance, kindly return the form to the student applicant. Thank you.*

DATE _____

STUDENT NAME (LAST NAME, FIRST, MIDDLE NAME) _____

STUDENT ID NO.:

DEGREE PROGRAM _____

RATING	POINTS
Excellent	9 -10
Very Good	7-8
Satisfactory	5-6
Moderately Satisfactory	3-4
Poor	1-2

SIGNATURE ABOVE PRINTED NAME OF RATER

POSITION / DESIGNATION

DATE

The nominee

- 1. Initiates activities and projects of service to a specific community _____
- 2. Participates extensively in the implementation of the project _____
- 3. Contributes significantly to the group effort of improving the community's resources _____
- 4. Is able to involve the members of the community throughout the activity _____
- 5. Is able to work well with others throughout the project _____
- TOTAL POINTS** _____

IMPORTANT

*The rater is expected to provide remarks about the nominee's participation in a **specific community development project**.*
