

The President's Volunteer Service Award

CAAL PVSA Summary Form (Form A)

12 Months Period: Sept. 1, 2016 - Aug. 31, 2017

Name:		School:	_ D.O.B.	•	
		0) □ Teen (11-15) □ Young Adult			
	□ Adults	(26 and older) \square Families and Grou	ps		
Dates	Organization	Service/Activity/Event (descript	tion)	CAAL Hours	Total Hours
		Total Hours (Sept. 1,- Aug. 31, 2	017)		
I certify that	the hours listed on this	Form have not and will not be submitted for c	eredit with	n any othe	r program.
Signature of Applicant			ate		
For CAAL US					
CAAL Director: Name			Oate		
Signature		F	ee Paid	Y	N