



# Volunteer Verification Survey Form

Please **COMPLETE** and **RETURN** this form following the completion of your Junior Achievement class.

1. Volunteer's Name: \_\_\_\_\_
2. **Signature (required):** \_\_\_\_\_
3. Total **number** of activities presented \_\_\_ Six \_\_\_ Eight \_\_\_ Other (how many? \_\_\_\_\_)
4. Name of School: \_\_\_\_\_
5. Teacher's Name: \_\_\_\_\_
6. Total **number** of students in the class: \_\_\_\_\_ Grade: \_\_\_\_\_
7. Problems, comments, suggestions, and/or ideas:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\* Please refer to JA's privacy policy at <http://www.ja.org/about/privacy.shtml>.*

**Please complete and mail or fax to the Junior Achievement office.**

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