

PMH CSON Student Community Site Verification Form

Instructional Module: IM 6

Student Name: Trinity Culpepper

Instructor Contact Information:

Annie Harrison - (806) 224-3078

Jaynie Maya - (806) 928-8753

Community Site: celebration AA center for students in addiction recovery Date: 4/10

\* Student's Arrival Time: 1830 Departure Time: 2030

\* Printed Name of Staff: Rachel Diaz student Signature: Rachel Diaz

Community Site: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Arrival Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_

Printed Name of Staff: \_\_\_\_\_ Signature: \_\_\_\_\_

Community Site: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Arrival Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_

Printed Name of Staff: \_\_\_\_\_ Signature: \_\_\_\_\_

Community Site: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Arrival Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_

Printed Name of Staff: \_\_\_\_\_ Signature: \_\_\_\_\_

Community Site: \_\_\_\_\_ Date: \_\_\_\_\_

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