



**Westfield High School Guitar  
Awards and Letter Program  
Verification for Award Points**

**Name:** \_\_\_\_\_ **Year of Graduation:** \_\_\_\_\_

Activity: Check one:

# Points Requested:

- |                          |   |       |
|--------------------------|---|-------|
| <input type="checkbox"/> | Outside Organizations                     | _____ |
| <input type="checkbox"/> | Private Lessons (6 + mos regular attend.) | _____ |
| <input type="checkbox"/> | Fundraiser (other than Tag Day)           | _____ |
| <input type="checkbox"/> | Clinic/Master Class:                      | _____ |
| <input type="checkbox"/> | Concert Attendance: Attach program        | _____ |
| <input type="checkbox"/> | Points for Previous Year Service          | _____ |
| <input type="checkbox"/> | Student Volunteer Hours                   | _____ |
| <input type="checkbox"/> | Director Points                           | _____ |
| <input type="checkbox"/> | Other Points                              | _____ |

Explanation of points requested (name of group, instructor, class, concert, fundraiser, etc)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Instructor, Director, Supervisor Name: \_\_\_\_\_

Phone Number/Email (for verification): \_\_\_\_\_

Signature of Instructor, Director, Supervisor: \_\_\_\_\_

Approved by Guitar Director: \_\_\_\_\_ Date: \_\_\_\_\_