A close-up of a logo

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Certificate of Appreciation

Presented to

[NAME]

With deep gratitude and appreciation for your participation as a volunteer during the Special Olympics Healthy Hearing Screening Event

[Location] on [Date],

and for your willingness to support

Special Olympics [Program Name] athletes.

|  |  |  |
| --- | --- | --- |
| **[Signature]**  Program Health Staff |  | **[Signature]**  Program Chief Executive Officer |