



Service Hours Form

Name: _____ Grade: _____

Theology Teacher: _____ Date form submitted: _____

Name of organization where I provided community service:

Description of the specific service I provided for this organization:

[To be completed by student.]

Service date(s): _____ Number of hours: _____

Supervisor's name (print):

Supervisor's signature:

(Parent may sign only if parent was supervisor/ chairperson of charitable event.)

Supervisor's phone: _____

Supervisor's email: _____

Check here to indicate you have entered hours into X2VOL

Turn into your Theology teacher NO LATER than the end of the quarter in which the service was performed...late hours will NOT be accepted!

Keep a copy of your service hours for your personal records.