Community Service Hours Reporting Form

Student Name _____ Grade _____

Please record your service hours in the table provided. Include the date of service, type of service, amount of time (must be 15 minutes minimum), location of service, and signature of person for whom service was performed. You may use additional forms as needed. Remember no more than 50% of your required service hours may be from Safety Patrol and Alter Service combined.

Date of Service	Type of Service	Hours (15 minute minimum)	Agency/Location of Service	Supervisor Signature
eg. 10/11/12	*Altar Service*	*1 hour*	*Holy Spirit Church*	*B. Chan Signature*