



St. John Neumann Regional Academy Jr./Sr. High School

SERVICE HOUR VERIFICATION FORM

GENERAL INFORMATION				
Name:		Grade:		
Religion Teacher:		Date:		
Location & Description of Service:				
<i>Record a separate entry for each day of service. Supervisor's signature and telephone number must appear for each entry!</i>				
	Date	Hours	Supervisor's Phone Number	Supervisor's Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Total Hours Completed: _____