

Service Hour Verification

Name: _____ Grade: _____

Date: _____ Religion Teacher: _____

Location and Description of Service: _____

Record a separate entry for each day of service. Supervisor's signature and telephone number must appear for each entry!

Date	Hours	Supervisor's Telephone and Signature
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____

Total Hours Completed: _____