

Our Lady of Mount Carmel School Service Form



Name: _____ Grade: _____

Name of Service Organization: _____

Pre-approval signature: _____ Date: _____

Area of service: school/church home community

Number of hours served: _____

Please write or type a description of your service project, including what you learned from this experience, and attach it to this paper.

...This section to be filled out by the director of your service program....

Name: _____ Date: _____

Signature testifying the above student volunteered his or her services:

Phone number: _____

***Please return this form to your homeroom teacher by _____.**