

School Year: _____ Semester: _____

Service Hours Documentation Form

Student's Name: _____ Grade: _____

Teacher's Signature _____

Agency /Church	Type of Service Project	Number of Hours Served	Date(s) Served	Signature of Project Supervisor	Phone Number of Project Supervisor	Hours to be completed per Grade Level
						6 th grade - 10 hours
						7 th grade - 15 hours
						8 th grade - 15 hours
						9 th grade - 15 hours
						10 th grade - 20 hours
						11 th grade - 25 hours
						12 th grade - 25 hours

Please answer the following questions regarding your service opportunities. Type your responses to the questions on a separate piece of paper and submit it with the form. Your response will be evaluated and applied to your second semester grade. Students who do not complete the paper and/or required number of service hours will lose 10% (one letter grade). Date due **May 18, 2018**

1. What was your volunteer community service activity and what role did you play in that activity?
2. How did you learn about these service opportunities?
3. How did your activity impact others?
4. What did you discover about yourself regarding the opportunity to serve others?
5. What challenges or difficult circumstances did you face as you served?
6. Describe some incident that occurred during your time of service that reminded you that you were serving Christ as you were serving others, and that Christ was pleased with your service.