

St. Daniel Record of Community Service



Name _____

Grade/Program: 6 ___ 7 ___ Conf Prep I ___ Conf Prep II ___ FIRE ___ Home Cat ___ Catholic School ___

Please record your service below and ask the supervising adult to sign, then turn in form to your teacher or the Faith Formation office.

1. Date: _____ Place _____ Description _____
Hours _____ Supervising Adult Signature _____
2. Date: _____ Place _____ Description _____
Hours _____ Supervising Adult Signature _____
3. Date: _____ Place _____ Description _____
Hours _____ Supervising Adult Signature _____
4. Date: _____ Place _____ Description _____
Hours _____ Supervising Adult Signature _____

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