

# NOTRE DAME COLLEGE SCHOOL

## Completion of Planned Community Service Activities' Form

<b>Student Name:</b>	<b>Grade:</b>
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Please submit this form to your Religion Teacher when you have completed your community involvement activities for this year.  
**Due dates: At the end of your Religion Module this year** Failure to return this completed sheet will result in "Zero" hours being credited for this school year, and no grade given for the Christian Service component of the course.

Information	Date(s) of Service	# of Hours	Activities Performed (explain fully)	Supervisor's Information
Location:				Name:  Signature: Telephone #:
Location:				Name:  Signature: Telephone #:
Location:				Name:  Signature: Telephone #:
Location:				Name:  Signature: Telephone #:
Location:				Name:  Signature: Telephone #:
<b>TOTAL:</b>				

Date

**Student's Signature** \_\_\_\_\_

**Parent's or Guardian's Signature:** \_\_\_\_\_

**Religion Teacher's Signature:** \_\_\_\_\_

FOR OFFICE USE ONLY	
<input type="checkbox"/> Completion has been noted on the student's OSR.	
_____ Signature of school official	_____ Date