



Service Hours Documentation Form

Be sure to print clearly and complete the form in its entirety. If there is any missing information, the form will be returned for completion before the service hours are counted.

Name:	Grade: 9 10 11 12
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Place of Service:

Date:	Time:	Total Hours:
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Description of Service Event:

How was this service experience meaningful to you?

Witness:	Signature:
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Phone Number or method of contact:
