



Christ the King Catholic School Junior High Service Hour Form

Student Name: _____

Date Hours Submitted to School: _____ Grade: _____

One sentence description of service performed:

Organization: _____

Name of Supervisor: _____

(Supervisor **CANNOT** be a parent without permission from Mr. Horn)

Signature of Supervisor: _____

Phone Number of Supervisor: _____

E-mail of Supervisor: _____

Date and times of service performed:

Date:

Time:

Ex) July 20, 2013 _____

4:45-6:15 _____

Total hours: _____

Below Line- Teacher Use Only

Date entered: _____

Quarter Hours: _____

Extra Hours to House Points: _____