

# SERVICE HOURS SUMMARY

## Calvin Christian High School

Please return this completed form to the CCHS office.

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Year of your graduation: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

### **Service Hour Opportunity #1:**

Agency / Organization served: \_\_\_\_\_

Supervisor / Leader of the project: \_\_\_\_\_

Date of service: \_\_\_\_\_

Number of Hours Served: \_\_\_\_\_

What kind of service did you provide?

\_\_\_\_\_

### ***Please make at least one comment about this service project.***

(Possible ideas: Did you enjoy it? Did you feel like you made a difference? Did it help you think about your future? Did you grow closer to God? Did you become more aware of needs in your community? Did you learn something new?)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

There is space to record additional service hour projects on the back of this form.

**Service Hour Opportunity #2:**

Agency / Organization served: \_\_\_\_\_

Supervisor / Leader of the project: \_\_\_\_\_

Date of service: \_\_\_\_\_

Number of Hours Served: \_\_\_\_\_

What kind of service did you provide?  
\_\_\_\_\_

***Please make at least one comment about this service project.***

(Possible ideas: Did you enjoy it? Did you feel like you made a difference? Did it help you think about your future? Did you grow closer to God? Did you become more aware of needs in your community? Did you learn something new?)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Service Hour Opportunity #3:**

Agency / Organization served: \_\_\_\_\_

Supervisor / Leader of the project: \_\_\_\_\_

Date of service: \_\_\_\_\_

Number of Hours Served: \_\_\_\_\_

What kind of service did you provide?  
\_\_\_\_\_

***Please make at least one comment about this service project.***

(Possible ideas: Did you enjoy it? Did you feel like you made a difference? Did it help you think about your future? Did you grow closer to God? Did you become more aware of needs in your community? Did you learn something new?)

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\_\_\_\_\_