



CHRISTIAN SERVICE HOURS (CSH) COMPLETION FORM

Student's name:	Theology teacher:	Grade:	Class period:	Type of service:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

My service goes beyond my ordinary duty :	<input type="text"/>	My service is a work <u>of</u> Mercy :	<input type="text"/>
My service is without compensation :	<input type="text"/>	My service fosters Gospel values :	<input type="text"/>

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- By checking this box, I certify that my service is **NOT** a Liturgical duty (i.e. serving at the altar, as a lector, in a choir, etc.)
- By checking this box, I certify that my service is **NOT** Household chores (i.e. mowing the lawn, baby-sitting, cleaning, etc.)
- By checking this box, I certify that my service is **NOT** Neighborhood chores (i.e. cleaning or helping at a festival, etc.)
- By checking this box, I certify that my service is **NOT** School Responsibilities (i.e. during the school day, team duties, etc.)

Brief description of your service:

Name and contact information of the organization (phone or e-mail):

THE BOX BELOW IS FOR **SUPERVISOR** ONLY - **DO NOT SIGN** UNLESS ALL THE FIELDS ABOVE ARE DIGITALLY FILLED

Comments:

Printed name: _____

Date: _____

Signature: _____

**TOTAL #
OF HOURS**
In the box below