



# Service Record

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Note to Student: Each session of service needs a separate form. Use a pen to complete this form.

Student Name: \_\_\_\_\_

Name of Service Site: \_\_\_\_\_

Date of Service: \_\_\_\_\_

Times of Service (beginning and end): \_\_\_\_\_ to \_\_\_\_\_

Number of Service Hours Completed: \_\_\_\_\_

What Corporal Work of Mercy is this service and why?

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Students, please complete at least two of the following statements on the back of the paper.

- A. What I learned about the needs of the people served...
- B. I made a "difference for good" through my service by...
- C. From this experience, in the future I hope I remember...
- D. If Jesus talked to me about what I did, I think he would say...

**Note to Service Supervisor:** Please keep a record of the student's volunteer work for verification purposes (a sheet on which to sign in and out.) **Please DO NOT SIGN this form unless the above information is completely filled out by the student.**

Name of Service Supervisor: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Supervisor Contact Number: \_\_\_\_\_

Supervisor E-mail: \_\_\_\_\_

Supervisor Comments (optional):