

CHRISTIAN BROTHERS ACADEMY- CHRISTIAN SERVICE VERIFICATION FORM

Name: _____ Grade in '21-'22: _____

Service Organization: _____

Supervisor Name: _____

Supervisor Email & Phone Number: _____

Christian Service Hours Log Sheet

Date	Time In	Time Out
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Hours Completed _____

Supervisor Signature _____