

Nativity of Mary School
Values for Life

Community Service Hours Completed

Date	Hours	Organization	Location	Description of Service	Signature of Supervisor

I certify that I have completed 10 hours of service at the above stated organizations.

Student Name _____
(please print clearly)

Grade _____

Student Signature _____

Parent Signature _____

**Please return to
student's home room teacher
when 10 hours are completed**