

Verification of Service Project Completed

Please fill out all the information below:

Name: First _____ Last _____

Name of your teacher: _____

Circle your Level: L7 L8 L9 L10

Class time-please circle: 5:00 p.m. 7:00 p.m.

This signed form confirms that the above named has participated in the service project

At: _____

On: _____ (date).

Signed _____ (Teacher chaperoning)

This sheet should be given to your regular Faith Formation teacher who will record your attendance on their class Service Project attendance sheet.