The Geneva School
Community Service Hours – Student Report

This form must be turned in to the Registrar’s Office in order to record service performed

This section should be completed by the student

Student’s Name: _________________________________  Grade Level: ___________

Total Number of Community Service Hours Performed: ______________

Please note that multiple occurrences of the same service to one organization may be recorded on one form.

Date(s) Service Performed: _______________________________

Name of Organization: _____________________________________

Give a brief description of the service performed:

This section should be completed by the person overseeing the service performed

Person overseeing service performed: ________________________________

Position Held: _____________________________________

Signature: ________________________________   Date: _____________________

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students met general requirements of volunteer activity</td>
<td></td>
<td></td>
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<tr>
<td>Students listened and followed supervisor’s instructions</td>
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<tr>
<td>Student’s attitude was respectful and Christ-like</td>
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<tr>
<td>The student made a positive contribution to the volunteer effort</td>
<td></td>
<td></td>
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</tbody>
</table>

If you answered ‘No” to any of the above, please comment:

Other comments: