

MA'AYANOT מעיינות

Community Service Completion Form

Name: _____

Grade: _____

E-mail Address: _____

Volunteered at: _____

Date: _____

Time Spent: _____

Supervisor's signature: _____

Supervisor's Phone number: _____

What tasks/projects did you do while volunteering:

Would you recommend this Chesed? Why or why not:

Optional: Was there a particularly memorable moment during your service?

Completed sheets should be put in Mrs. Weiner's box
For more information please contact Mrs. Weiner at 201-833-4307 ext. 237

For Office Use Only:
