



**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:**

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