



COMMUNITY SERVICE COMPLETION FORM

Student Name

Grade

Email Address

Volunteered at

Date Volunteered

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 of your service?

Completed Sheets to be submitted to Mrs. Klyman in the Main Office

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