

NOUVEL CATHOLIC CENTRAL HIGH SCHOOL

Christian Service Hour Record
Sophomore 2018-2019

(Please Print)

Student Name _____

Describe what you did _____

Organization's name _____

Date of service _____ No. of hours _____

Contact person's name and telephone no.

_____ Phone No. _____

X _____

Signature of contact person/supervisor

Kind of service: Community Church/Parish School

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