

VOLUNTEER SERVICE HOURS

Emmanuel Christian School
1001 North Marquis Hwy. Hartsville, SC 29550
843-332-0164 / fax 843-878-0501/
email info@ecscrusaders.com

This portion must be completed by the student.

STUDENT'S NAME: _____ GRADE: _____

Location of service: _____

Please circle which category this volunteer service is related to:

Ministry Service

Community Service

School Service

Description of duties completed : _____

Work log may be used for more than one service at the same location. Count actual working time only - not breaks, meals, travel.

Date	Begin-End Times	Total Hours of Credit

This portion must be completed by the work supervisor.

Supervisor's Name: (please print) _____

Organization Name: _____

Contact Information: _____

I understand I may be contacted by Emmanuel Christian School. I verify that the student named worked the hours shown above.

Date

SUPERVISOR'S SIGNATURE

Student Signature: _____

By signing this I verify that I have fully served the hours listed on this form.