San Juan Diego Catholic High School Service Hours Documentation Form

Be sure to print clearly and complete the form in its entirety. If there is any missing information, the form will be returned for completion before the service hours are documented.

Grade: 9 10 11	12 Semester:	Fall Spring
Print Name		
Place of Service:		
Date:	Time:	Total Hours:
	you encountered som was in need of assistan	neone in need. What did you observe that revealed to you ace?
Witness Name:		Signature:
Phone Number or M	Method of Contact:	

Please return this form to Ms. Flores: Campus Minister Questions?: campusministry@sjdchs.org