

The Saint Paul School Serve Ten Form

Serve 10: 5 hours of charitable service (approved list*) and 5 hours of school/community/church service

ANY charitable service conducted outside of the approved agencies (see website) MUST BE <u>PRE-APPROVED</u> by Campus Ministry. If the hours served are NOT pre-approved, THEY WILL NOT BE ACCEPTED.

Hours counted must represent only time spent in **active service**; travel/sleep time in an overnight setting should not be included.

Neither the student, nor anyone related to the student, may sign this form.

Community service hours may not be performed for family members.

All community service hours must be done for free.

Service will **NOT** be accepted from any of the following:

- Private/relative-owned/for-profit businesses, organizations, or agencies
- Politically affiliated groups

Complete a separate form for each organization/agency (including school service hours) and submit to Ms. Ann in the Counseling Center as soon as service and form are completed.

THIS PART TO BE FILLED IN BY THE STUDENT				
STUDENT'S NAME	GRADE	NAME OF O	RGANIZATION/AGENCY REPRESENT	ATIVE (PLEASE PRINT)
TOTAL HOURS	DATE SERVICE BEGAN	DATE SERVI	CE ENDED	
DESCRIPTION OF SERVICE			(*if not on a received app	ritable Service pproved list, I have
STUDENT'S SIGNATURE		DATE		
THIS PART TO BE FILLED	IN ONLY BY THE OF	RGANIZATI	ON/AGENCY REPRESENTA	TIVE
NAME OF ORGANIZATION/AGENCY		NAME OF ORGANIZATION/AGENCY REPRESENTATIVE		
TOTAL HOURS	DATE SERVICE BEGAN		DATE SERVICE ENDED	
REPRESENTATIVE'S PHONE AND/OR EMAIL (MUST HAVE ONE OR THE OTHER)		REPRESENTA	ATIVE'S SIGNATURE	