

COMMUNITY SERVICE ACTIVITY FORM

GREENWICH
CATHOLIC SCHOOL



Name: _____ Grade: _____

Organization: _____ Location: _____

Date(s) Service Performed: _____ Total Time: _____ hrs.

Describe the activity and the service you performed. What specifically did you do?

Service to those in special need, persons who are poor and/or vulnerable: ___Yes___No

If "Yes," please explain:

Please explain **how your act of service helped others** and **how your efforts made a difference for the organization or community** in which you served.

In a few sentences, please describe **how you lived out Jesus' commandment to love your neighbor** in this community service experience.

Signature of adult supervising this service opportunity:

"I affirm that _____ performed the community service activity listed above."
STUDENT NAME

Name (please print): _____ Title: _____

Signature: _____ Date: _____ Phone #: _____

All Upper School students at GCS are required to perform a minimum number of community service hours each year. Service activities can either be an organized effort, or as a response to needs that are presented in students' daily lives. It is expected that community service takes the student beyond the needs of his/her immediate family and circle of friends.

PLEASE RETAIN A COPY FOR YOUR RECORDS