



NOTRE DAME

HIGH SCHOOL · CHATTANOOGA

Community Service Verification Form

Name: _____ Grade: _____

Theology Teacher: _____ House: _____

Service Date(s) and Time: _____

Total Number of Hours: _____ Personal Service **OR** Communal Service

Organization or person(s) for which service was completed: _____

What service was performed? Give enough detail to justify how this service qualifies for personal service points or communal service points.

Forms should be turned in to the chaplain's office. Please direct any questions or concerns to Fr. Christopher at (423) 624-4618 or frchristopher@myndhs365.com.

TO BE COMPLETED BY SITE SUPERVISOR

Site Supervisor (Printed name and title): _____

Site Supervisor Signature: _____

Phone Number: _____ E-mail: _____