

"If I washed your feet - I who am teacher and Lord - then you must wash each other's feet. What I just did was to give you an example: as I have done , so you must do." John 13:14-15

Bishop Rosecrans High School Service Verification Form

Name _____ Class of: _____ Date: _____

I completed _____ service hours through the project listed below.
(Please list hours in half hour increments)

Project/Event/Ministry: _____

Location: _____

Date(s) of hours completed: _____

Hours are for: _____ Church _____ School/Community

Person Verifying hour(s): _____ **(Please print)**

Signature: _____ **Phone number:** _____

Date: _____ **Verifying Person's Position:** _____

Mentor Teacher: _____ **Date of record:** _____

1. What kind of service did the above hours involve you in? (Check all that apply)

____ Education
(i.e. tutoring, library services,
Sports camps, coaching)

____ Church
(i.e. server, lector, choir
PSR, breakfast)

____ School
(i.e. Bazaar, Auction,
teacher help, Alumni office)

____ Human Services
(i.e. babysitting, food pantry
Camp Counselor)

____ Community
(i.e. festivals, tournaments
animal shelter)

____ Environment
(i.e. cleaning up parks, trails)

2. Did this service change your perspective on your community, Church, or school? Explain your answer.

3. If service was done with an outside agency (i.e. Christ's Table, Work Camp, Neighbor helping Neighbor) would you recommend others to work with them?

Strongly Agree Agree Disagree Strongly Disagree

4. Did you develop a working relationship with someone as a result of your community service experience? (Check all that apply)

Supervisor on site Another Adult on site A teacher
 Another student A person being helped No one

5. Overall, how satisfied were you with your service experience?

Very Satisfied Somewhat Satisfied Somewhat Dissatisfied Very Dissatisfied

6. What did you like and dislike about your service experience? Please explain.