

Espirito Santo School Community Service Card

**Please turn in this card to Mr. Raposo
at the close of 1st Trimester (11/22/2017)**

Before School Service Assignment

Faculty Signature: _____
Please initial each box with the amount of minutes spent. (Example: AR/15)

Week ending	Sep 1	Sep 8	Sep 15	Sep 22	Sep 29	Oct 6	Oct 13	Oct 20	Oct 27	Nov 3	Nov 10	Nov 17
MON												
TUE												
WED												
THU												
FRI												
Total												

Lunchtime School Service Assignment

Faculty Signature: _____
Please initial each box with the amount of minutes spent. (Example: AR/15)

Week ending	Sep 1	Sep 8	Sep 15	Sep 22	Sep 29	Oct 6	Oct 13	Oct 20	Oct 27	Nov 3	Nov 10	Nov 17
MON												
TUES												
WED												
THUR												
FRI												
Total												

After School Service Assignment

Faculty Signature: _____
Please initial each box with the amount of minutes spent. (Example: AR/15)

Week ending	Sep 1	Sep 8	Sep 15	Sep 22	Sep 29	Oct 6	Oct 13	Oct 20	Oct 27	Nov 3	Nov 10	Nov 17
MON												
TUES												
WED												
THUR												
FRI												
Total												

Faith Formation (see Mr. Raposo before participating).
Please initial each box with the amount of minutes spent.
(Example: AR/15)

Week ending	Sep 1	Sep 8	Sep 15	Sep 22	Sep 29	Oct 6	Oct 13	Oct 20	Oct 27	Nov 3	Nov 10	Nov 17
Time												
Initials												

Signature of Director of Program _____

Choir Participation

Please initial each box with the amount of minutes spent. (Example: AR/15)

Week ending	Sep 1	Sep 8	Sep 15	Sep 22	Sep 29	Oct 6	Oct 13	Oct 20	Oct 27	Nov 3	Nov 10	Nov 17
Initials												

Signature of Director of Program _____

Outside of School Service (Attach letter from organization)

Date	Time Served	Service	Staff Signature



Outside of School Service **MUST be pre-approved in writing by the coordinator.**

Attach documentation on letterhead from the person supervising you.

Parent Signature: _____

Office Use Only

Grade Level	In-School Hours Required	In-School Preformed	Out of School Hours Required	Out of School Hours Performed
Grade 6	5			
Grade 7	5		5	
Grade 8	10		5	

Student's Name

**First Trimester
Community Service Card**

Please turn in this card to Mr. Raposo at the close of 1st Trimester (11/22/2017)

All Service MUST be dated and signed for within ONE WEEK of performing that service! All service requirements will be strictly enforced.
Please review your service contract!