



Monsignor McClancy Memorial High School
Office of Campus Ministry

Student Service Hour Activity Log

Student's Name (Please Print): _____

Student's Home Room: _____

Students: You must record and submit a fully completed time sheet to Mrs. Sciame-Dodato, Campus Minister, with your service experience and appropriate signature in a timely manner each month. There is a completed service hour mailbox outside the Campus Ministry Office.

Supervisors: Please print your name, organization, and phone number at the bottom of this page. Also, please sign this sheet every time you work with this student, to confirm that the student performed the service hours.

Thank you for your support with our service program.

Date:	Total Hours:	Service Performed	Supervisor Signature:

Supervisor's Name (Please Print): _____

Parish/School/Agency Name (Please Print): _____

Phone Number: _____

(Office Use ONLY: Date Received: _____)