

## Senior Service Verification Form 2011/2012

Name: \_\_\_\_\_

Date: \_\_\_\_\_

This document confirms that \_\_\_\_\_  
has completed a total of \_\_\_\_\_ hours of Christian service for  
Bishop Foley High School.

Event: \_\_\_\_\_

Service  
provided: \_\_\_\_\_

Date of event: \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

Contact name: \_\_\_\_\_

Contact phone #: \_\_\_\_\_

**This form should be signed by the authorized adult at the time the service is performed. FAILURE TO DO THIS MAY RESULT IN LOSS OF CREDIT. Please give form to Mr. McCormick/Campus Minister when completed. All Christian Service hours will be logged and updated by the Campus Minister.**

## Junior Service Verification Form 2011/2012

Name: \_\_\_\_\_

Date: \_\_\_\_\_

This document confirms that \_\_\_\_\_  
has completed a total of \_\_\_\_\_ hours of Christian service for  
Bishop Foley High School.

Event: \_\_\_\_\_

Service  
provided: \_\_\_\_\_

Date of event: \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

Contact name: \_\_\_\_\_

Contact phone #: \_\_\_\_\_

**This form should be signed by the authorized adult at the time the service is performed. FAILURE TO DO THIS MAY RESULT IN LOSS OF CREDIT. Please give form to Mr. McCormick/Campus Minister when completed. All Christian Service hours will be logged and updated by the Campus Minister.**

# Sophomore Service Verification Form 2011/2012

Name: \_\_\_\_\_

Date: \_\_\_\_\_

This document confirms that \_\_\_\_\_  
has completed a total of \_\_\_\_\_ hours of Christian service for  
Bishop Foley High School.

Event: \_\_\_\_\_

Service  
provided: \_\_\_\_\_

Date of event: \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

Contact name: \_\_\_\_\_

Contact phone #: \_\_\_\_\_

**This form should be signed by the authorized adult at the time the service is performed. FAILURE TO DO THIS MAY RESULT IN LOSS OF CREDIT. Please give form to Mr. McCormick/Campus Minister when completed. All Christian Service hours will be logged and updated by the Campus Minister.**

# Freshmen Service Verification Form 2011/2012

Name: \_\_\_\_\_

Date: \_\_\_\_\_

This document confirms that \_\_\_\_\_  
has completed a total of \_\_\_\_\_ hours of Christian service for  
Bishop Foley High School.

Event: \_\_\_\_\_

Service  
provided: \_\_\_\_\_

Date of event: \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

Contact name: \_\_\_\_\_

Contact phone #: \_\_\_\_\_

**This form should be signed by the authorized adult at the time the service is performed. FAILURE TO DO THIS MAY RESULT IN LOSS OF CREDIT. Please give form to Mr. McCormick/Campus Minister when completed. All Christian Service hours will be logged and updated by the Campus Minister.**

