

St. Elizabeth Ann Seton Middle School
Christian Service Hours Form



Student Name: _____

Grade: _____ **Class Period** _____

Circle: First Semester or Second Semester

Fill in (Service at Church, School, or In Community):

Required Hours

6th Grade: 3 hours/Semester
7th Grade: 4 hours/Semester
8th Grade: 5 hours/Semester

Date of Service: _____ **Number of Hours Served:** _____

Organization Served: _____

Description of Service:

Signature of Person for whom Service was Performed: _____

Phone Number of Person for whom Service was Performed: _____

Reflection: Select a Scripture Passage that correlates with the service that you preformed.

- 1. Cite it (Book, Chapter, and Verse):** _____
- 2. Write out the Quote:** _____

(Possible Scriptures: Gn 2:15, Ex 20:12, Prv 21:21, Tb 4:16, Zec 7:9, Mt 24:40, Acts 21:35, 1 Cor 10:31, Gal 5:22, 1 Pt 4:10, 1 Jn 4:11)

- 3. Write a reflection on how the verse you quoted ties in with your service:** _____

Student Signature: _____

Parent Signature: _____