

HOLY NAME OF JESUS SCHOOL
3060 N Highway A1A
Indialantic, FL 32902
321-773-1630

Community Service Form

Student Name _____

Supervisor's Name _____

Location of Service _____

Type of Service _____

Date of Service _____

Total Hours Completed _____

Please describe the student's responsibility:

Please rate the student's performance

Outstanding _____ Average _____ Below Average

Please rate the student's attitude, appearance and willingness to help

Outstanding _____ Average _____ below Average

SUPERVISOR'S SIGNATURE _____