



Oklahoma Christian School

Community Service Completion Form

Please PRINT

Name (first and last) _____ Grade _____

(Name) _____ has completed _____ hours for the 20____-20____ school year.

Name of Institution: _____

Supervisor evaluation: _____

Students will need to turn in their forms to the main office.

Mid-year check date will be the day we return for classes in January.

All hours are due by April 30th.

Please refer to the handbook for consequences if deadlines are not met.

The undersigned certify that physical service was performed for communal benefit, and that no material goods, donations, or financial assistance were exchanged for community service hour sponsorship.

Student Signature _____

Date _____

Supervisor Signature _____

Date _____

Parent Signature _____

Date _____

Questions to be completed after completing your community service

4=Strongly Agree 3=Somewhat Agree 2=Somewhat Disagree 1=Disagree

1. Did you enjoy this service project? 4 3 2 1

2. Is this something you would consider doing again? 4 3 2 1

3. Was this service project a "face-to-face" service? 4 3 2 1

4. What "needs" were you able to meet by doing this community service?

5. Would you recommend this community service to one of your friends? YES NO
Why or Why Not?