



Quincy Notre Dame High School Christian Service Hours Form

Non-profit Organization Helped: _____

Date of Service Work: _____ Number of Hours Worked (to nearest 1/2 hr.) _____

Brief Description of Service Work: _____

Signature of Service Recipient: _____ Phone No. of Recipient: _____

Complete the following checklist:

- I completed this service project for free.
- All parts of this service form are completed
- I served a non-profit organization preapproved by **QND**
- I reviewed all the requirements and restrictions of the **QND Christian Service Program** as a reminder of my yearly service work commitments.

Student's Signature: _____ Student's Name (PRINT): _____

Student's Year at QND (Please Circle): **FRESHMAN** **SOPHOMORE** **JUNIOR** **SENIOR**

Quincy Notre Dame High School • 1400 South 11th Street • Quincy, IL 62301 • 217-223-2479 • www.quincynotredame.org



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