



**ORANGEWOOD
ACADEMY**

**Service Learning/Community Service
Record of Activities**

(Give completed form to your Religion Teacher)

Student Name: _____ Grade: _____

Description of Activity:

Date(s): _____ Supervisor Signature: _____ Hours: _____

Description of Activity:

Date(s): _____ Supervisor Signature: _____ Hours: _____

Description of Activity:

Date(s): _____ Supervisor Signature: _____ Hours: _____

Description of Activity:

Date(s): _____ Supervisor Signature: _____ Hours: _____