



**Holy Redeemer Catholic School**  
**2025-2026 Personal Service Hours Completion Form**  
**(This form is to be completed entirely in pen.)**

Name of Student: \_\_\_\_\_

Homeroom: \_\_\_\_\_

**Section 1 (to be completed by Agency Supervisor)**

Date of Service: \_\_\_\_\_ Total Hours of Service: \_\_\_\_\_

Name of Agency: \_\_\_\_\_

Supervisor Name: (printed) \_\_\_\_\_

Position in Agency: \_\_\_\_\_

Contact Information (Phone number and/or email address):  
\_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

**Section 2 (to be completed by student)**

Briefly describe your service activity:

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Briefly describe what you learned by completing this service:

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Student Signature: \_\_\_\_\_