

Christian Service Report
THE FATHER STEPHEN T. BADIN HIGH SCHOOL

571 New London Road, Hamilton, Ohio 45013
Phone: 513-863-3993 Fax: 513-785-2844

HR # _____
Rel Class Period: _____

Name of student: _____ Present Year of Study: __9 __10 __11 __12

Name of Student's Religion Teacher: _____

Name & Address of Organization: _____

Name & Title of Evaluator (Please Print) _____

Signature of Evaluator: _____ Date: _____

Brief Description of Service Performed: (to be completed by evaluator) _____

- Number of Service Hours Completed by Student: _____
- Starting Date of Service: _____ Completion Date: _____
- The Student was: (please check all that apply)
 Helpful Trustworthy Punctual Courteous Other

Thank you for making a service opportunity available to this young person. If this report form has to be mailed, the student should provide a stamped addressed envelope.

Please return to Badin marked to the attention of the **CHRISTIAN SERVICE COORDINATOR!**



Student Reflection:

Please write 3-5 sentences describing what you learned from this service experience.
HOW DID YOU MAKE A DIFFERENCE by volunteering with this organization?
Please be specific and complete. Use the back if needed.
