



SERVICE RECORD FORM

To activate logging of service undertaken on or off campus, complete the details below and submit to the member of staff in the Student Services Office.

Name: _____ Year ____ House _____

Date (S) of Service _____ Non-school Activity

School Activity Teacher Name _____

Description of service (Type of activity, place and details of what took place)

Total Hours Claimed

Verification

(If non-school activity. Completed by an adult – not a family member - able to verify the service)

Name _____ Signature _____

Contact email or phone number _____

Office Use Only -----

Approved Not approved

Service Context Hours Type
