

NATIVITY OF THE BLESSED VIRGIN MARY HIGH SCHOOL, INC.

Member of the Middle States Association of Colleges and Secondary Schools



One Lawtons Hill

Pottsville, Pennsylvania 17901-2795

Area Code (570) 622-8110

Fax (570) 622-0454

NAME OF STUDENT \_\_\_\_\_ Date: \_\_\_\_\_

Grade \_\_\_\_\_ HR \_\_\_\_\_

TO WHOM IT MAY CONCERN:

The Diocese of AUentown mandates that all students complete Community Service hours during each of the four academic years. The above-named student indicates that you supervised him/her during the time he/she was earning service hours. Kindly complete and sign the form to verify the service(s) performed. You may return it to the student, mail or fax it directly to the Community Service Coordinator at the numbers listed in the letterhead.

Thank you and God bless you for providing the opportunity for this student to serve under your supervision.

1. Identify the place or the event where the service was performed: \_\_\_\_\_

\_\_\_\_ School      \_\_\_\_\_ Community      \_\_\_\_\_ Church

2. Describe briefly the types/kinds of activities the student performed:.

3. Total Hours: \_\_\_\_\_ Date provided:.

*Note: If the total number of hours served took place on several dates, please use the back side of this form to enumerate the hours and the dates on which the service as performed.*

4. Evaluate the attitude and quality of work done:

Attitude:      \_\_\_\_\_ Excellent      \_\_\_\_\_ Very Good      \_\_\_\_\_ Good      \_\_\_\_\_ Poor

Quality of Work:      \_\_\_\_\_ Outstanding      \_\_\_\_\_ Above Average Worker      \_\_\_\_\_ Good  
   \_\_\_\_\_ Some Effort Shown      \_\_\_\_\_ Poor Work, not helpful

5. Your Name \_\_\_\_\_ Position \_\_\_\_\_

Signature \_\_\_\_\_

Your telephone number\_