

## Christian Service Record

Student Name: \_\_\_\_\_ Graduation Year: \_\_\_\_\_ Circle one: M F

			Supervisor Use Only			Kennedy Office Use Only				
Date	Organization and Description of Duties	# of Hours	Supervisor Name/ Contact information	Supervisor Signature	Uniform: Y or N	A	B	C	Extra	Approved by CS Office
<b>Kennedy Office Use Only: Total A:</b>		<b>Total B:</b>		<b>Total C:</b>		<b>Total Banked for next year:</b>		<b>Total Extra:</b>		