#5 Name:

Signature of Parent or Adult Representative to verify service performed

<u>Individual Hours Record Sheet</u> - Tto be filled out handed in to teacher)

This Service Hour or Opportunity was for (Please circle) Opportunity for Prayer, Service, Discipleship, or Fellowship If Service, which category? (Please circle) Church, Home, Community, School	
# of hours (minutes) served:	
Description of Service performed or the Opportunity for Prayer completed:	
What did you learn from this experience?	
Signature of Parent or Adult Representative to verify service performed Signature of Candidate	_
This Service Hour or Opportunity was for (Please circle) Opportunity for Prayer, Service, Discipleship, or Fellowship If Service, which category? (Please circle) Church, Home, Community, School	
# of hours (minutes) served:	
Description of Service performed or the Opportunity for Prayer completed:	
What did you learn from this experience?	
Signature of Parent or Adult Representative to verify service performed Signature of Candidate	_
This Service Hour or Opportunity was for (Please circle) Opportunity for Prayer, Service, Discipleship, or Fellowship If Service, which category? (Please circle) Church, Home, Community, School	
# of hours (minutes) served:	
Description of Service performed or the Opportunity for Prayer completed:	
What did you learn from this experience?	

Signature of Candidate