



SAINT DOMINIC ACADEMY

121 Gracelawn Road
Auburn, Maine 04210
207-782-6911

Community Service Form (to be completed by the student)

Student Name: _____

Religion Teacher: _____

Nonprofit organization for whom the service is being provided:

Organization: _____

Address: _____

Phone: _____

Contact person: _____

Brief description of the service provided:

Location where service was performed: _____

Date(s) when the service was performed: _____

Time (hours) taken to complete the project: _____

Parent signature: _____ Date: _____



Student: Answer the following questions:

1. What did you gain from this community service experience?

2. What did you like about this community service project?

3. Was there anything you did not like about this community service experience?

To be completed by the Community Service Supervisor

I, _____, wish to validate that
_____ has satisfactorily
complete _____ hours of community service on this/these dates _____.
Please comment on any positive and/or negative aspects of this particular student and
their service to you.
