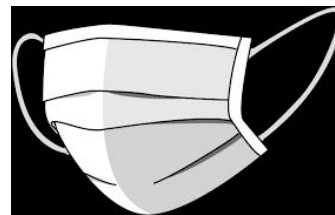


Charleston Catholic High School
Community Service Activity Form
Services rendered during the COVID-19 Pandemic
March 13 - May 29, 2020



Please BOLD all your responses.

Name:

Grade: Theology Period:

Organization (If Applicable):

Date(s) Service Rendered:

Total Time in Hours:

Confirmed by service coordinator or middle school theology teacher verification:

Describe the activity and the service you performed. What did you specifically do?

Was this service to those with **special needs**, persons who are poor and/or vulnerable?

Yes or No:

If yes, in what way?

During this time of crisis, we are all called upon to take small actions to carry one another's burden. Two important ways that we care for one another is by keeping one another **healthy** and by facilitating **social connection** over the physical distance. How has your service contributed to one or both of these caring tasks?

Honor Code: Type your name to affirm that you have recorded the service with integrity in a manner that honors your dignity and the dignity of your efforts.

Student Name as Signature:

Date: