# ST.PAUL RELIGIOUS EDUCATION

## VOLUNTEER SERVICE HOURS TRACKER

**Students Name:**

**Student Signature:** _____ **Parent Signature:** _____

| PARTICIPANT RECORD LOG | | | | |
|---|---|---|---|---|
| **DATE** | **EVENT** | **SUPERVISOR PHONE OR EMAIL** | **SUPERVISOR SIGNATURE** | **HOURS** |
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**Tracker to be signed by student and a parent or guardian upon completion**
**Each student is responsible for their hours sheet**
**All hours MUST be completed at St. Paul Catholic Church**