

# NOTRE DAME SERVICE HOUR VERIFICATION SHEET

(DUE BY MARCH 15<sup>TH</sup>)

Student Name: \_\_\_\_\_ Grade \_\_\_\_\_

Location: \_\_\_\_\_

Type of Service Performed: \_\_\_\_\_

Date(s) of Service: \_\_\_\_\_ # of Hours: \_\_\_\_\_

Indicate the Work(s) of Mercy Your Service Activity Meets (left column is **Corporal**, right column is **Spiritual**):

Feed the Hungry  
Give Drink to the Thirsty  
Clothe the Naked  
Shelter the Homeless  
Visit the Sick  
Visit those in Prison  
Bury the Dead

Instruct the Ignorant  
Counsel the Doubtful  
Admonish the Sinner  
Comfort the Sorrowful  
Forgive Injuries  
Bear Wrongs Patiently  
Pray for the Living and the Dead

Did you enjoy the service you performed? Would you recommend other people doing it? Would you do it again?

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Service Coordinator/Supervisor's Name (please print): \_\_\_\_\_

Service Coordinator/Supervisor's Signature: \_\_\_\_\_

Service Coordinator/Supervisor's Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

"WHATSOEVER YOU DO TO THE LEAST OF MY BRETHREN, THAT YOU DO UNTO ME" – JESUS CHRIST

"IMITATORS OF CHRIST" – ND MOTTO