## CATHOLIC HIGH SCHOOL

3043 West Scott Street, Pensacola, Florida 32505 (850) 436-6400 FAX (850) 436-6405

## **SERVICE CONFIRMATION FOR 2024-2025 SCHOOL YEAR**

**CHS Core Value: Commitment to Service** 

Student Name:		Grade:	
Hour(s) Completed:	Date(s) Rendered:		
Traceable charity assisted:			
Circle the Category You Served: Disable	d / Environment / Poor / Elderly / Disadvanta	aged / Church / School/ Communi	
Circle the Corporal Work of Mercy You I			
Feed the Hungry	Give Drink to the Thirsty	Clothe the Naked	
Care for the Sick	Visit the Imprisoned	Bury the Dead	
Shelter the Homeless	Give Alms to the Poor (Donations	Give Alms to the Poor (Donations limited to ten hours)	
Describe your SPECIFIC activity/assistar	nce to the group:		
Supervisor signature:	Position:		
Phone:	<u>E</u> mail:		
Parent Signature			