

Service Credit Hours

School Year _____

St. Joseph and St. Anthony Parishes
(Requirement: 5 Parish - 5 Community - 5 Family)

DUE:

REQUIRED

St. Anthony

___ Fall Supper

___ Pancake Breakfast

St. Joseph

___ Spring Dinner

___ Summer Picnic

___ Fall Supper

Name: _____

Date of Service	Type of Service: Parish/Community/ Family	Service Description	Hours Earned	Signature

Parent Signature Verification _____