

GOOD SAMARITAN ACTS OF KINDNESS/SERVICE LIST

Completion of this form is required for students in grades K-8 who choose to do service in addition to classroom projects if they wish to be recognized. Please submit the form to your Religion teacher by the end of May.

Name _____ **Grade** _____ **Homeroom** _____

Date _____ Total Hours _____

Place/Event _____

What I Did _____

Date _____ Total Hours _____

Place/Event _____

What I Did _____

Date _____ Total Hours _____

Place/Event _____

What I Did _____

Date _____ Total Hours _____

Place/Event _____

What I Did _____

Date _____ Total Hours _____

Place/Event _____

What I Did _____

