

**St. Hubert Catholic High School for Girls
Community Service-VIP Program
“Very Involved People”**

Student ID _____ Date of Service _____
Please Print
Name _____ Homeroom _____

Service Description _____

Total Hours of Service _____

Type of Service: Parish _____ School _____ Community _____ Home _____

Student’s Signature _____ Date _____

Adult Supervisor _____ Date _____

This copy is to be retained by the student.

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This copy is to be filed in the Student Affairs Office.