

# CHRISTIAN SERVICE RECORDING FORM

**MSGR. CHICOINE SCHOLARSHIP FUND  
ST. CHARLES CATHOLIC CHURCH, MEREDITH, NH**

Additional forms are available at the parish office or the religious education office. You may duplicate this form.

The Monsignor Chicoine Scholarship Fund recognizes students for their volunteer services to their church, community and/or school.

This form will be required as part of the application process for a scholarship.

***EACH VOLUNTEER ACTIVITY REQUIRES A SEPARATE FORM.***

Student Name \_\_\_\_\_

*(Please print)*

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ School Name \_\_\_\_\_

*Circle Year*                  Freshman                  Sophomore                  Junior                  Senior

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**TO BE COMPLETED BY STUDENT**

Type of Service (*circle one*)      Church                  Community                  School                  Other

Service Location \_\_\_\_\_

*(i.e.: Golden View Nursing Home, St. Charles Church, etc...)*

Description of Service \_\_\_\_\_

\_\_\_\_\_

Volunteer Dates \_\_\_\_\_

*(list one date or if done on a regular basis, the range of dates)*

Approximate Total Number of Hours Contributed \_\_\_\_\_

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**TO BE COMPLETED BY SUPERVISOR OF VOLUNTEER SERVICE**

Name \_\_\_\_\_

Position \_\_\_\_\_ Organization \_\_\_\_\_

I confirm that \_\_\_\_\_ served as a volunteer for our organization on the dates specified above.

Comments about the student or service \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Supervisor \_\_\_\_\_ Date \_\_\_\_\_