



St. Angela Merici

Volunteer Service Experience

Use this page to document your service project. If you volunteer twice at the same location, you do not need to fill in the address, contact person/phone number twice. **Just be sure to get a signature and date.** *Keep this page in your journal packet.*

AGENCY FIRST VISIT

Name of agency/place where you volunteered

Address

Name of contact person/supervisor (printed)

Phone number

Signature of contact person/supervisor

Date of service

**Give a brief description of the service you performed: _____

AGENCY SECOND VISIT

Name of agency/place where you volunteered

Address

Name of contact person/supervisor (printed)

Phone number

Signature of contact person/supervisor

Date of service

**Give a brief description of the service you performed: _____

PARISH VOLUNTEER ACTIVITY

Parish

Name of contact person/supervisor (printed)

Phone number

Signature of contact person/supervisor

Date of service

**Give a brief description of the service you performed: _____

ADDITIONAL SERVICE (agency or parish)

Name of agency/place where you volunteered

Address

Name of contact person/supervisor (printed)

Phone number

Signature of contact person/supervisor

Date of service

**Give a brief description of the service you performed: _____
