



Bourgade Catholic High School

4602 North 31st Avenue
Phoenix, Arizona 85017
Phone 602-973-4000 • Fax 602-973-5854

General Volunteer Service Verification Form

Freshman Year Sophomore Year Junior Year Senior Year

Name of Student Volunteer: _____

Date(s) of Service: _____ Number of Hours: _____

Brief Description of Service: _____

Place of Service: _____

Address (if not at Bourgade): _____

Supervisor Name: _____

Telephone Number: _____

(This section to be completed by the volunteer supervisor)

The above named student has accurately recorded the information above. I verify that she/he has completed the recorded number of service hours.

Signature of Supervisor

Date

Hours

“If I, therefore, the master and teacher, have washed your feet, you ought to wash one another’s feet. I have given you a model to follow, so that as I have done for you, you should also do.” --John 13:14-15