



Dear Volunteer Coordinator,

The student below has committed himself to complete all or part of his 80-hour Christian community service requirement at your agency or organization. It is understood that your agency will make every effort to allow him to complete these hours by personally interacting with those requiring assistance. All work will be done without compensation.

We ask that the person who is supervising the student's work at the volunteer site fill out this form. The student will not receive credit for his work unless a completed form is submitted within 6 months of the service. Thank you for your cooperation.

Student Name \_\_\_\_\_ / Graduation Year \_\_\_\_\_

Name of Agency: \_\_\_\_\_ / Telephone: \_\_\_\_\_

Dates service was done: \_\_\_\_\_ / Total Hours: \_\_\_\_\_

Check the category that best describes the type of work the student did for the majority of his volunteer experience:

- Student worked with children (working as a coach, camp counselor, tutor etc.)
- Student worked with at-risk youth (working as a coach, camp counselor, tutor etc.)
- Student provided direct services (interacted with) for people who are homeless, ill, disabled, or elderly
- Student worked to preserve the environment or helped animals
- Student did mainly clerical / office work
- Other: Explain \_\_\_\_\_

Please briefly describe the student's responsibilities:

(Form continues on back)

Please circle the number that best describes the performance of the student:  
1= Needs improvement; 2 = Below average; 3 = Average;  
4 = Good; 5 = Excellent

Relations with Others	1	2	3	4	5
Attitude	1	2	3	4	5
Dependability	1	2	3	4	5
Quality of Work	1	2	3	4	5
Attendance and Punctuality	1	2	3	4	5

Other Comments:

Signature of Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Daytime Phone Number or Email: \_\_\_\_\_



Signature of Student: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_