

## **Academy of the Holy Names Service Form**

## TO BE COMPLETED BY STUDENT

Student's Name		Grade	
Name of Organization			
Address of Organization _			
Supervisor	Email	Phone	
Date of Service	Total Hour	Total Hours of Service	
No more than half (12.5) of the The balance of hours are "out	he required hours for each year may	t be entered by the December deadline. be satisfied through service to or at AHN. It organization, serving the disadvantaged bevelopmentally.	
	erformed:		
TO BE COMPLETED BY SUP	ERVISOR		
to follow directions, etc			
		Date	
"I certify that the informat	ion described on this form is con	exect, and that the student mentioned	

"I certify that the information described on this form is correct, and that the student mentioned above did perform the service described."

Current Academy of the Holy Names students who have registered with x2vol should make a digital copy of this form and log on to www.x2vol.com to upload as an attachment to submit these completed service hours. Incoming students should keep these completed forms until they have registered with x2vol.com.

Questions? Email Mission & Ministry Coordinator Kim Wiley at kwiley@holynamestpa.org.