

ST. JOHNS VIRTUAL
SCHOOL



Creating a New Tradition in Education

Service Hour Report

The following student, _____, has completed a total of _____ hours of service on _____ (date).

Students and a Parent/Guardian must sign below confirming these hours in order for Guidance to accept them. If you feel like there is a mistake in the hours on record, please indicate in the comments section below.

SJVS Faculty Supervisor

Date

Student Signature

Date

Parent/Guardian Signature

Date

Comments:

Once all signatures are present, please turn this letter in to your zoned school Guidance Counselor.