

Christian Service Proposal

Name of Student: _____

Position: _____

Organization: _____

Responsibilities (brief description of what is required):

Qualifications and Prerequisites (specific knowledge, abilities or training needed):

Place and Time Details:

Location of Ministry: _____

Times and Dates of Ministry: _____

Total Expected Hours: _____

Contact and Supervision

Name of Contact: _____ Number: _____

Name of Supervisor: _____ Number: _____

Confirmation of Project to be Completed

The student signature is signed to confirm an acceptance to complete the specified project by the student. Once the student has completed the project, then this form is to be signed by the supervisor of the activity and returned to the Christian Service Coordinator (your teacher) at Glenmary School.

(Student)

Date

(Christian Service Coordinator/teacher)

Date

(Supervisor)

Date