

VOLUNTEER SERVICE FORM

Student Name _____ School _____

Community Service Site: *SOLID WORD BIBLE CHURCH – VACATION BIBLE SCHOOL*

Address: *4374 W. 52nd St., Indianapolis, IN 46254* Telephone: *317-291-2400*

Name of Contact Person/Site Supervisor _____

Email address _____

Volunteer Service Date(s) _____ Volunteer Hours _____

Responsibilities: _____

Personal Reflection: _____

TO BE COMPLETED BY SITE SUPERVISOR

Please rate the student in the following way:

A= Always S= Sometimes R= Rarely N= Never

_____ 1. Dependable

_____ 2. Arrives on time

_____ 3. Calls in if absent or late

_____ 4. Follows directions given

_____ 5. Works well with adults and others

_____ 6. Shows initiative; works well independently

_____ 7. Seems to have a good understanding of the work to be performed

_____ 8. Dresses appropriately for work assigned

_____ 9. Represents the Solid Word Bible Church in a positive manner

Other comments: _____

Supervisor's Signature _____ Date ____/____/____