



# CHRISTIAN SERVICE ACTIVITY RECORD



HWCDSB

Christian Service Website: [www.hwcdsbcs.com](http://www.hwcdsbcs.com)

Student's FIRST NAME

Student's LAST NAME

GRADE

AGE

SCHOOL

				St. Jean de Brebeuf Catholic SS
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Christian Service is at the heart of Catholic education and has been a long-standing tradition within the Hamilton-Wentworth Catholic District School Board. The Christian Service Program helps to foster in students an understanding of Catholic Social Teachings with an emphasis on human dignity, the preferential option for the poor, solidarity, civic responsibility and participation. The program enables students to develop and share their God-given gifts and skills with others in the wider community. The Christian Service Program in the Secondary Schools within the Hamilton-Wentworth Catholic District School Board satisfies the graduation requirement for the Ontario Secondary School Diploma (Ontario Schools: Kindergarten to Grade 12: Policy and Program Requirements, 2016).

## SUBMISSION CHECKLIST

Scan the QR code to visit our website



- Ensure that your Christian Service opportunity is ELIGIBLE.** Please refer to our website [www.hwcdsbcs.com](http://www.hwcdsbcs.com) or see your Christian Service Animator **before** starting your Christian Service.
- Your form is properly completed with the following information: First & Last Name, Grade, Age, School, Activity, Description, Date(s), Number of Hours, Organization Name, Supervisor Name/Contact/Signature.
- Student and Parent/Guardian signatures.
- Submit your form to Student Services/Guidance office** or email the form to your Christian Service Animator after your placement is complete!

**Please keep a photocopy for your records. This information may be useful for resumes, awards, scholarships, etc.**

Number of Hours	Completion Date (MM/DD/YYYY)	Christian Service Role	Name of Organization/Location

**Description of Christian Service**  
*Please describe the event/opportunity, your role and tasks, etc.*

<b>Supervisor's Name</b> <b>Phone Number</b> <b>Contact Email</b>	<b>Supervisor's Signature</b> <i>This is a not for profit organization or event</i>

**Insurance Coverage:** Community Sponsors are responsible for providing a safe environment, appropriate training and supervision for students. For more information about this program, please contact HWCDSB (905) 525-2930. Community sponsors also should be aware that, like job shadowing and other similar work-experience program, students do not have accident insurance or Workplace Safety Insurance coverage through the School Board. It is recommended that students involved in the program purchase Student Accident Insurance.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### FOR OFFICE USE ONLY!

**TOTAL NUMBER of hours on this entry** →

Age of Majority (No parent signature required)

School Official initials confirming hours have been recorded.

Signature of Christian Service Animator: \_\_\_\_\_

Date: \_\_\_\_\_

