



J Serra Catholic High School

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Website: www.jserra.org

California Scholarship Federation

Service Hours Report Form

Date: _____

Name: _____ Graduation Year _____

Number of Service hours: _____ date of Service _____

Contact Person To Verify: (please print) _____

Phone number (for non Jserra personnel) _____

Signature of Contact person: _____

Description of Service: _____
