BLESSED TRINITY CATHOLIC SCHOOL
ADULT VOLUNTEER HOUR LOG
2025-2026

DATE	# OF HOURS	SERVICE TYPE/FUNCTION	Verified by

**APPROVED SERVICE TIME MUST DIRECTLY BENEFIT THE MATERIAL CONDITION OR OPERATION OF THE SCHOOL.

**PLEASE TURN IN THIS FORM AT THE END OF EACH QUARTER.

**ALL SERVICE HOURS FULFILLED OUTSIDE OF SCHOOL OR SCHOOL HOURS (WHERE VOLUNTEER DID NOT SIGN IN ON OFFICE COMPUTER) MUST BE INCLUDED ON THIS LOG.

**GIRL SCOUTS/BOY SCOUTS/YOUTH GROUP FUNCTIONS/EVENTS AND CHRISM MASS DO NOT COUNT TOWARD VOLUNTEER HOURS.

**Hours served in fundraising for the specific benefit of the 8th grade class or your child's sporting event do not count toward volunteer hours.

Name: _____

Student/Family Name: _____

DATE REC'D: _____
(Office Use Only)

DATE INPUT: _____
(Office Use Only)