

# Christian Service Proposal Form

Turn-in deadline: FRIDAY, OCTOBER 1, 2010

***THIS FORM MUST BE SIGNED AT THE BOTTOM BY THE PROGRAM SUPERVISOR (OR A REPRESENTATIVE) AS PROOF THAT YOU DISCUSSED THIS PROJECT WITH THE SUPERVISOR BEFORE COMMITTING TO THE PROJECT. UNSIGNED PROPOSALS WILL NOT BE ACCEPTED.***

Your Name: \_\_\_\_\_

Your Class Year (circle one):  2011  2012  2013 Homeroom Section: \_\_\_\_\_ - \_\_\_\_\_

Your SPSV E-Mail: \_\_\_\_\_ @ spsv.org

Religion Teacher: \_\_\_\_\_ Period: \_\_\_\_\_ Room: \_\_\_\_\_

Name of Non-Profit/Community-based program: \_\_\_\_\_

Name of Supervisor/Coordinator: \_\_\_\_\_

Program Address: \_\_\_\_\_

Program Supervisor's Phone Number: \_\_\_\_\_

Briefly describe this project: \_\_\_\_\_

\_\_\_\_\_

Approximate dates you plan to volunteer here: \_\_\_\_\_

Explain how your gifts/talents will be used during this project:

\_\_\_\_\_

\_\_\_\_\_

Why does this project appeal to you?

\_\_\_\_\_

\_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Program Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

***PROPOSALS WITHOUT NECESSARY SIGNATURES WILL NOT BE ACCEPTED.***