

Trinity Christian Academy
10 Windy City Road · Jackson, TN · 38305
Phone: (731) 668-8500
fax: (731) 668-3232

Dear Agency or Individual:

Thank you for the opportunity you have given our students for service. We appreciate your assistance in allowing us to serve your organization. If we may be of service in the future, or if you have any questions, please do not hesitate to call us at (731) 668-8500.

Sincerely,

Dr. Sam Botta
Head of School
Trinity Christian Academy

Student's Name: _____ Year of Graduation: _____

#1

All sections must be completed and signed by a supervisor of the volunteer work.

Agency/Individual for whom the student is volunteering: _____

Address of Agency/Individual: _____

Type of Service: _____

Number of hours the student is involved with this endeavor: _____

Date the volunteer work was performed: _____

Supervisor Signature: _____

#2

All sections must be completed and signed by a supervisor of the volunteer work.

Agency/Individual for whom the student is volunteering: _____

Address of Agency/Individual: _____

Type of Service: _____

Number of hours the student is involved with this endeavor: _____

Date the volunteer work was performed: _____

Supervisor Signature: _____