



## Cochins International Junior Program

### Record of Service

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

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

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Please Provide a Description of the Type of Service You Performed. Include the Details of Who, Where, What, When, etc. (you may use the back of this page if needed):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature and Phone Number of an Adult Witness:

\_\_\_\_\_

Please mail completed form to the CI Junior Program Chair:

Ross Treffert

5133 Ridge Road

Cortland, OH 44410

Phone: 330-397-6385

Email: Ross.Treffert@outlook.com