

# Mitzvah Hours Completion Form

Date: \_\_\_\_\_

Student: \_\_\_\_\_

Please circle either:

TBA Synagogue      or      Community

\_\_\_\_\_ Print organization name

Adult Supervisor signature: \_\_\_\_\_

# of Volunteer Hours: \_\_\_\_\_

Describe your duties/experience:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Make a copy of this completed Voucher Form for your records, then hand in this original to the Religious School office. It may also be emailed to [alichtenstein@tbanj.org](mailto:alichtenstein@tbanj.org). Additional forms are available at: [www.tbanj.org](http://www.tbanj.org).