

Covenant College  
Off Campus Mark 10:45 Request Form  
2019-2020

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

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Project 52     | <input type="checkbox"/> Chattanooga Sports Ministry | <input type="checkbox"/> Hope for the Inner City        |
| <input type="checkbox"/> Young Life     | <input type="checkbox"/> Chattanooga Food Bank       | <input type="checkbox"/> Ronald McDonald House          |
| <input type="checkbox"/> New City ESL   | <input type="checkbox"/> Widow's Harvest Ministry    | <input type="checkbox"/> Choices Pregnancy Center       |
| <input type="checkbox"/> Family Promise | <input type="checkbox"/> Bethel Bible Village        | <input type="checkbox"/> Habitat for Humanity of Chatt. |
| <input type="checkbox"/> United Way     | <input type="checkbox"/> BBBS Chattanooga            | <input type="checkbox"/> Other (please list info below) |

Ministry you wish to work with: \_\_\_\_\_

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

Supervisor name and title: \_\_\_\_\_

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

1. The services to be performed are

2. These services promote the concept of serving others as follows:

***We, the undersigned, understand our responsibilities to communicate with Covenant College about any problems or concerns, and agree to abide by program policies, should the request be granted.***

\_\_\_\_\_  
Supervisor signature

\_\_\_\_\_  
Date

***I, the undersigned, know and understand that it is my responsibility to complete 15 hours per semester with this assignment and to report to the supervisor listed above.***

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date