

Request for Service

All information needs to be completed for request to be considered.
The person requesting the service should be the one to complete the information.

Date: _____

Name: _____ Contact Name (if Different): _____

Contact Phone number: _____
Home Work

_____ Fax number if available

_____ E-mail address if available

Address of Project: _____

Date of Birth: _____ Number in Household: _____

Significant info about Requestor: (i.e. health, special needs, etc.): _____

_____ HGBC Member?

_____ Description of Service Requested:

_____ Time frame requested for service/work to be completed:

_____ Able to pay for materials needed?

_____ How did you hear about this ministry?

_____ Why do you need help with this project?

_____ Directions from Hickory Grove Baptist Church:

For office use only:

Date reviewed: _____ Team Leader project assigned to: _____

Release Form received: YES _____ NO _____ Date Team Leader contacted: _____

Project Evaluation

For Internal Use Only – To be completed by Team Leader

Team Leader/Coordinators name: _____

Volunteer Name: _____ Volunteer phone number: _____

Date volunteer/s contacted by Team Leader/Coordinator: _____

Date of call to person requesting assistance: _____

Date of Inspection: _____ Estimated Cost: _____ Approved by: _____

Date Project/Service completed: _____

Comments of volunteer/s: _____

Comments from person requesting assistance: _____

Salvation? _____ Gospel Presented? _____

Visit or prayer requested or recommended by church? _____

PROJECT SUMMARY

Number of hours to complete project: _____ Number of volunteers: _____

Expenses Incurred: _____

Name to Reimburse: _____ Amount to Reimburse: _____

Paid for out-of-Pocket: _____ Materials Charged: _____

(Amount)

(Amount)

Receipts Must Be Attached

Name of Person completing form: _____ Date: _____