Community Service Hours

Name:_____ Phone #_____

Grade Level: _____ School Year: _____

Type of Service	Date	Time In	Time Out	Total Hours	Supervisor's Signature	Supervisor's Phone #
			Total hours:			

I certify that all of the above information is true and correct. I also certify that the community service hours reported above were volunteer and unpaid.

_____ _____

Student Signature Student Name (printed)

Community Service Hours

Name:_____ Phone #_____

Grade Level: _____ School Year: _____

Type of Service	Date	Time In	Time Out	Total Hours	Supervisor's Signature	Supervisor's Phone #
			Total hours:			

I certify that all of the above information is true and correct. I also certify that the community service hours reported above were volunteer and unpaid.

_____ _____

Student Signature Student Name (printed)