

## **COMMUNITY SERVICE LOG**

Directions: Please complete all sections. Each service activity should have the signature of an adult sponsor of the activity with the phone number at which they can be contacted to verify information. You may list all the community service s outside of school in which you participated. Do not list any service for which you received monetary compensation. A minimum of 25 hours per year are required.

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

Dates of			Adult Common discontinuo
Community Service	# of Hours	Service Provided	Adult Sponsors signature and phone number
Service	# OI HOUIS	Service Provided	and phone number
Total # of hours:			
I verify that the abo	ve information	n is true and accurate.	
i verify that the abo	ve imormation	i is true und accurate.	
Student Signature:			Date:
Parent Signature: _			Date: