

**COMMUNITY SERVICE PROGRAM**  
**RECORD OF VOLUNTEER SERVICE HOURS**

**MAXIMUM NUMBER OF HOURS ACCEPTED PER DAY IS 8 (EIGHT)**

Student Name: \_\_\_\_\_ ID# \_\_\_\_\_ Class of: \_\_\_\_\_

Intended Purpose of Community Service Hours (check all that apply):

- Bright Futures       HS Credit       Graduation Honors

Date	Agency Name	Activity Performed	Time In	Time Out	Total Hours	Contact Person's Signature

Total Hours Volunteered: \_\_\_\_\_

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

Service Supervisor Name: \_\_\_\_\_

Service Supervisor Signature: \_\_\_\_\_