

## STUDENT VOLUNTARY COMMUNITY SERVICE LOG (please print with blue or black ink)

School Year:			
Semester	ı	II	
	(circl	e one)	

NAME		SCHOOL	Student Number		Circle Current Grade Level					
					9	10	11	12		
<ol> <li>Indicate MONTH that the service took place.</li> <li>Group same activities for that month with total hours and 1 verification signature</li> <li>Add up all hours for grand total</li> <li>Submit service log to the school counseling office</li> </ol>										
Month	Agency/Location	Number of Hours	Verificat	ion Signature	ure Comments					
Total Hours Volunteered  DATE SUBMITTED					Student: If you want a copy of this for your records, duplicate before submitting.					