

**Community Service Hours
Time Record Sheet**

Student's Name

Student ID or Social Security Number

Date

Scholarship Name

The student is responsible for completing the required number of hours of community service from an approved agency during the semester for the scholarship awarded. The Time Record sheet must be completed and signed by the agency in order to receive full credit for the service hours.

.....
Agency Name: _____ Phone: _____

Contact Person: _____ Signature: _____

Number of Hours Completed: _____ Date Completed: _____

Type of Work: _____

.....
Agency Name: _____ Phone: _____

Contact Person: _____ Signature: _____

Number of Hours Completed: _____ Date Completed: _____

Type of Work: _____

.....
Agency Name: _____ Phone: _____

Contact Person: _____ Signature: _____

Number of Hours Completed: _____ Date Completed: _____

Type of Work: _____

.....
Agency Name: _____ Phone: _____

Contact Person: _____ Signature: _____

Number of Hours Completed: _____ Date Completed: _____

Type of Work: _____
.....