



SERVE-101 Community Service Log

Student Information

Name: _____ Local Phone: _____

Local Address: _____
 Street City State Zip

Course Information:

Instructor: _____ Section: _____ Semester/Year: _____

Site Information

Agency: _____ Phone: _____

Site Supervisor: _____ Email: _____

Signature: _____

Date	Start Time	End Time	Service Performed	On-Site Supervisor Signature (*)

(*) Should be signature of actual on-site supervisor during actual service, which may be different than signature on service agreement.

Total Hours: _____

Student: Submit this form to your SERVE-101 Instructor once you have surpassed the required service hours.