

RECORD OF COMMUNITY SERVICE

Student Name _____	Grade _____
School _____	School Telephone _____

LOCATION _____ Telephone _____	Time _____	From _____
Supervisor's Signature _____ Date _____		To _____
Duties _____		Number of Hours <input style="width: 40px;" type="text"/>

LOCATION _____ Telephone _____	Time _____	From _____
Supervisor's Signature _____ Date _____		To _____
Duties _____		Number of Hours <input style="width: 40px;" type="text"/>

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Supervisor's Signature _____ Date _____		To _____
Duties _____		Number of Hours <input style="width: 40px;" type="text"/>

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