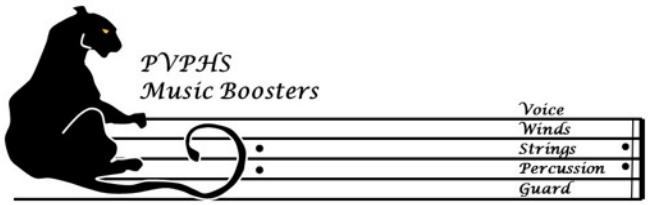


# Community Service Project

Student Name: _____

Activity: _____

Supervisor Name and Phone Number: _____

_____

| Date | How Many Hours | Supervisor Initials |
|---|---|---|
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