

IH PTSA COMMUNITY SERVICE PROGRAM - Hours Log

DEADLINE FOR THE CLASS OF 2016: Monday, MAY 2, 2016

Student Name _____

Student Email _____

Phone _____

Graduation Year _____

Date of Service	# of Hours	Name of Organization	Description of Service	Name of Supervisor	Signature of Supervisor	Supervisor phone/email

SCAN AND EMAIL completed form to: issyhighcommunityservice@gmail.com. PLEASE RETAIN A COPY FOR YOUR RECORDS

TOTAL HOURS

Congratulations on your hard work and thank you for making a positive contribution to your community.

To the best of my knowledge, the total community service hours recorded on this document accurately reflect those hours performed by me.

Student Signature Date

Parent Signature Date

