Community Service Hours Log Sheet 2020-2021

First Half Due (5hrs)	Final Hours Due (Total=10hrs)
During Midterm Exam Week	April 30, 2021

Please use the form below to document your Christian community service hours and responsibilities. When documenting recurring service, please use a new line for each week of service. If you would prefer to attach an official log or formal documentation from an organization, all columns must be filled in other than date & time in order to be considered complete. Take this form with you on the day of your service or when dropping-off projects so that you can have it signed at that time by a member of the organization.

Turn in to Campus Ministry Office ASAP.

Organization (and event - if applicable)	Date & Time	Hours	Supervisor Name and Title	Supervisor Phone or Email	Supervisor Signature
Example:					
Our Daily Bread	11/3/20 9a-1p	4	Sandy Smith – Volunteer Manager	(Name & email/number)	(signature)
Example:	6/6/20-6/10/20		-		·
Beachmont Christian Camp	8a-12p each day	20	Jack Smith - Volunteer Coordinator	(Name & email/number)	(signature)

*If a signature cannot be acquired, due to a pre-approved remote/virtual activity, please staple to this log an email with a supervisor's confirmation of your hours or a verification of hours from a screen shot of the activity. Additionally, please send at least one picture to Mrs.

Baxter via email for activities done remotely and not directly with an organization's supervisor*

Organization (and event - if applicable)	Date & Time	Hours	Supervisor Name and Title	Supervisor Phone or Email	Supervisor Signature

Please describe in detail your responsibilities during these hours of service:						

Use reverse to document more hours and experiences

Organization (and event - if applicable)	Date & Time	Hours	Supervisor Name and Title	Supervisor Phone or Email	Supervisor Signature	
Please describe in detail your responsibilities during these hours of service:						
Organization				Supervisor Phone or	Supervisor	
(and event - if applicable)	Date & Time	Hours	Supervisor Name and Title	Email	Signature Signature	
Please describe in detail your re	sponsibilities durin	g these ho	ours of service:			
Organization (and event - if applicable)	Date & Time	Hours	Supervisor Name and Title	Supervisor Phone or Email	Supervisor Signature	
Please describe in detail your responsibilities during these hours of service:						
rease describe in detail your responsibilities during these nours of service.						