Webutuck High School Community Service Program
Time Sheet

Name:	Date:	

Grade:	Name of Organization(s):

Timesheet - Keep a Daily Record of your Community Service Hours

Date	Time	Hours volunteered	Organization Name
		Total Hours:	

Description of Services that were Performed:

_____

_____

_____

_____

_____

_____

Student Signature:	Date:
Signature of Supervisor:	Date:
Principal Approval Signature:	Date: