Antietam MSHS Community Service Log

Student's Name: _____ Class of: Please complete a new page for each activity completed. • Please ask your activity supervisor to initial your hours each day and sign at the bottom where indicated once you have your hours completed. • Submit the signed form to Ms. Pollock Activity/ Organization: _____ Supervisor's Name : ______ Phone # : _____

Supervisor's Email: _____ Date: _____

DATE	TIME IN	TIME OUT	TOTAL HRS/MINS	WORK PERFORMED	SUPERVISOR'S INTIALS

Total number of hours: ______ Supervisor's Signature: ______

Student's Signature: Date: