

**FLORIDA ATLANTIC UNIVERSITY™**  
A.D. HENDERSON SCHOOL/FAU HIGH SCHOOL

**Community Service Log Sheet**

**Student Name:** \_\_\_\_\_ **Student # (Focus Account):** \_\_\_\_\_ **Graduation Year:** \_\_\_\_\_

**School Year:** \_\_\_\_\_ **Grade Level:** \_\_\_\_\_ **Name of Organization with which the service is being performed:** \_\_\_\_\_

**Summary of community service activities:** \_\_\_\_\_

**Supervisor's name:** \_\_\_\_\_ **Supervisor's phone #:** ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**Supervisor's email:** \_\_\_\_\_@\_\_\_\_\_

Please Note:

1. Submitting this log sheet does not mean the hours indicated will automatically be applied. All volunteer hours are subject to verification.
2. Service Hours must be performed at a NON-PROFIT organization. If you have any questions regarding this, please see guidance counselor.
3. Students should make a copy of this form before it is submitted and keep that copy for their records.

Date	Activity or Task Performed	Time In	Time Out	Hours Worked	Supervisor's Signature
<b>Total Hours Volunteered</b>					

