



Lake Mary Preparatory School
Community Service Log Sheet

Not-for-Profit Organizations and/or LMP Hours

Student Name _____

Grade _____

Organization _____

Organization Contact Person _____

Phone Number (____) _____ - _____ (____) _____ - _____

Description of Service _____

Date:	Time In - Out	Number of Hours	Supervisor's Signature & Comments

Parent Signature _____

For Office Use Only:

Date Received _____