

# Innovations Scholars Application

## Community Service Hours

Beginning Date \_\_\_\_\_ End Date \_\_\_\_\_

Student Name \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

### Fill in dates and daily hours worked

Type of Community Service	Date	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total

Total Hours \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

Student Signature \_\_\_\_\_