YOU MUST HAVE A COMMUNITY SERVICE CONTRACT ON FILE TO RECEIVE CREDIT.

Atwater High School Community Service Log 2023-2024

Student Name:			G	_Grade Grad Y		d Year _	ear ID #		
Non-Profit Site Name:									
Site Supervisor:				Telephone:					
Instructions for MONTH. Circle the Month	that you	are subn	nitting ho	ours. Lo	cate the b	oox with	the numb	per of the	e first
date you comple box to the right of Grand Total of al Submit forms moffice.	of this day ll the hou	y under tl rs you wo	he colum orked thi	nn nameo s month.	d Hrs. To Sign & l	tal each c ave supe	column of ervisor sig	f hours & gn this fo	k the orm.
Circle Month: Aug. Sept. Oct. Nov. Dec. Jan. Feb. Mar. Apr. May June									
									June Hrs
Day Hrs	Day 8	Hrs	Day 15	Hrs	Day 22	Hrs	Day 29	_	nrs
2	9		16		23		30		
3	10		17		24		31		
4	11		18		25				
5	12		19		26				
6	13		20		27				
7	14		21		28				
Above Fotal	Above Total		Above Total		Above Total		Above Total		
Grand Total of Hours for the Month:									
The above is a true & accurate account of my community service hours.									

I verify that the above site is a non-profit site and the hours recorded are true & accurate.

Supervisor Signature: