

JFK COMMUNITY SERVICE HOURS

Name _____

Student's Birth Date: _____

Grade: _____

Phone # _____

Date	What Type of Work Did You Do?	# Hours Worked	Organization Where You Volunteered	Printed Name AND Signature of Adult Who Supervised your Volunteer Service	Phone Number
TOTAL HOURS:					

Print out this form and use it to record your volunteer service hours. You'll need to obtain a signature every time you volunteer. Make a copy of this form for your records and place the original in your portfolio.