## Volunteer Hours or Bright Futures Scholarship Community Service Hours Log Sheet

		Home		
Home Address		Zip		
Expected Graduation Date for Bright Futures only		lySchool		
Date Task Performed Brief Explanation	Hrs. C	Community School  Agency/ Organization	Title/Signature of Supervisor and phone number	
			* · ·	
			:	
	Total *			
It is the student's responsibility to maintain the verification of volunteer or community service hours.  Please submit this form to guidance at the end of each month. * Please total your hours worked.				
I verify that this log is a true and accurate record of my unpaid volunteer or community service.				
Student's Signature	D	ate Submitted	_	