Volunteer Hours **or** Bright Futures Scholarship
Community Service Hours Log Sheet Grades 9-12

Name _____ Home Phone _____

Home Address _____ Zip _____

School _____ Expected Graduation Date for Bright Futures only _____

Date	Task Performed Brief Explanation	Hours Worked	Community or School Agency or 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. **Students may earn volunteer hours in grades 9-12 only**.

* **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_____ Date Submitted_____

08-27-2012