



**Lake Mary Preparatory School**  
**Community Service Log Sheet**

Not-for-Profit Organizations and/or LMP Hours

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

Grade \_\_\_\_\_

Organization \_\_\_\_\_

Organization Contact Person \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Description of Service \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date:	Time In - Out	Number of Hours	Supervisor's Signature & Comments

Parent Signature \_\_\_\_\_

**For Office Use Only:**

Date Received \_\_\_\_\_