



COMMUNITY SERVICE LOG

Forms are due by the 10th of the month following community service

Family member: _____

PH Unit# _____

Dates and Times:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total hours _____

Service Location and Duties Performed:

Supervisor/Contact Person's Name and Phone Number:

Supervisor's Signature: _____