# SERVICE HOURS LOG

Child's Last Name: _____ Grade(s): _____

Parent Name(s): _____ Phone Number: _____(day/eve)

Today's Date: _____ Signature: _____

| Date (mo/yr) | Activity | # of Hours | Event Name (if applicable) | type |
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DIRECTIONS: Please fill in the month/year of service, a brief description of the work, the number of hours worked and the event name, if applicable. Please indicate the type of hours worked: (F) for Fundraising or (S) for Service in general.

Please submit Service Hours Log in the weekly Family envelope or drop at School Office.