

## Sumter Academy Verification of Community Service Hour Sheets

Student: \_\_\_\_\_

Date	Description	Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

She/he worked a total of \_\_\_\_ hours. Her/his efforts were in support of \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_.

\_\_\_\_\_  
Signature Phone Number

\_\_\_\_\_  
Printed Name Date

Phone Numbers MUST accompany signature.