Student Name _____ **ACADEMY OF AMERICAN STUDIES**

Official Class _____ **School Year 2011-2012** **COMMUNITY SERVICE RECORD**

Date of Service	# of Hours	Type of Service	Contact Person (print)	Signature of Contact Person	Phone #	Evaluation/ Comments

TOTAL NUMBER OF HOURS = _____

NOTE: IF YOU EARN MORE THAN 100 HOURS FROM ONE CONTACT PERSON, YOU MUST SUBMIT A LETTER OF DOCUMENTATION!