

BROOKLINE HIGH SCHOOL

Community Service Program Timesheet

Students: please fill in the top portion of this form and have your program supervisor sign the bottom at the conclusion of your community service experience. Forms must be returned to the community service coordinator, room 161, by May 1 to receive credit for the current school year. Send questions and/or requests for Prior Approval for more than 50 hours of service to: hal_mason@psbma.org

50 Hours = .25 credit 100 Hours = .50 credit 150 Hours = .75 credit 200 Hours = 1.00 credit

PLEASE PRINT:

Name: _____ ID #: _____ Grade: _____

Advisory: _____ Best phone #: _____ E-Mail Address: _____

Name of Program: _____ Agency Responsible For Program: _____

Day and Date	Hours of Service

Day and Date	Hours of Service
TOTAL:	

Supervisors Please Complete This Section:

The above named student has successfully completed the listed hours of Community Service.

Supervisor's Name: _____ Title: _____

Supervisor's Signature: _____ Date: _____

E-Mail Address: _____ Direct Phone: _____