



University School of Jackson Community Service Time Sheet

A time sheet must be filled out for every community service activity that is performed.

Student Name: _____ Home phone: _____

Address: _____ Advisor: _____

Site/Project name: _____

Description of Activity or Service: _____

Date	Time In	Time Out	Total Hours	Supervisor's Signature

Please return this sheet to your Advisor.

Received: _____ Date: _____

Advisor's Signature

**University School of Jackson
232 McClellan Road
Jackson, TN 38305**