

Community ServiceRecord Form

Name:	Email:
Program/Year:	Phone Number:
Please complete this section if you are com or agency.	pleting most of your service hours at an external organization
Note: Service hours completed through SJ	C may only be verified and signed by approved SJC
personnel.	
Name of Organization/Agency:	
Address:	Phone:
Name of Supervisor:	Supervisor's Signature:
 University students are request to the state of the state of	t complete a total of 100 service hours, while ired to complete 40 service hours. eted in the Junior College division are non-transferable to the ced reflection paper on how your service experience igns your time card during each visit. If full, download and print a new one from the school
Stu	dent Affairs Use Only
Hours Completed:	- Stamp
Date Submitted:	Here
Approved By:	



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DATE	ACTIVITY/SITE	HOURS COMPLETED	SUPERVISOR' SIGNATURE