Community Service Hours TIMESHEET **Homebase Teacher (CSA): _____**

Student Name: _____

Name of Organization(s): _____

Supervisor: _____ **Telephone #: _____**

Parent/Guardian: _____ **Telephone #: _____**

DATE	MIN/HOURS	WHAT YOU DID—*Be Specific*	SUPERVISOR SIGNATURE ✍

To print out additional timesheets, visit *Good Citizens of the Community* GoogleClassroom.