



THE FOOD LOUNGE

Community Service Hours Tracking Form

Please take this form with you, obtain the signature after each project is finished,
and keep track of your hours.

thefoodloungedetroit@gmail.com

Volunteer Name: _____ Phone Number: _____ Email: _____ School: _____

Date	Duty Performed	Place of Service	Total Hours	Supervisor Name / Phone Number	Supervisor Signature