



**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.

thefoodloungelongisland@gmail.com

Volunteer Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_ School: \_\_\_\_\_

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