

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.

thefoodloungetwincities@gmail.com

Volunteer Name:		Phone Number:	Email: _		School:	
Date	Duty Performed	Place of Service	Total Hours	Supervisor Name / Phone Number	Supervisor Signature	

The Food Lounge EIN: 87-3929418