



HONORS PROGRAM - DOCUMENTATION OF SERVICE

Location: _____

General Description of Service: _____

Date	Time (whole or part hours)	Brief description of specific service activities on this date (do not use hash marks)	Supervisor Verification

Continue on reverse

Date	Time (whole or part hours)	Brief description of specific service activities on this date (do not use hash marks)	Supervisor Verification

I attest that this is a true account of my time spent on this service project.

Student Name (print) _____ **Date** _____

Student signature _____ **“S”#** _____

Supervisor Name (print) _____

Supervisor signature _____ **Date** _____

Attach additional sheet(s) if needed