

INDIVIDUAL COMMUNITY SERVICE HOURS TRACKING FORM

Use this form to track time to track your Individual Community Service Hours. When complete, enter the hours on the **Career Cruising** web page.

Print Name: _____ **SDNB ID Number:** _____ **Graduation Year:** _____

Email: _____ **Parent Contact:** _____

Hours may **NOT** be earned for:

1. Any service with a material or monetary reward
2. Court-referred community service hours
3. Fundraising for New Berlin clubs, sports or organizations.
4. Hours working for a business or organization that earns a profit
5. Hours helping a family member in a role that typically any family member would do, e.g. babysitting for a sibling, household chores, etc.
6. Hours worked before June 10, 2017.
7. Hours worked prior to the last day of your 8th grade year

Date(s)	Total Time	Organization	Activity	Supervisor's Contact Info	Supervisor's Signature

Total Hours: _____

Parent/Student Confirmation of Hours of Service: I hereby verify that the Community Service activities were completed as described above:

Student Signature: _____ **Date:** _____ **Parent Signature:** _____ **Date:** _____