LOG OF VOLUNTEER HOURS

Student _____

Date(s) Served	Organization Name & Address	Hours Served	Comments

FPEA FORM PROVIDED COURTESY OF THE FLORIDA PARENT-EDUCATORS ASSOCIATION - 2010

VOLUNTEER / COMMUNITY SERVICE HOURS

Student Name _____

Organization Served _____

Date(s) Served _____

Number of Hours Volunteered _____

Brief Description of Work or Service Performed _____

_____

_____

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_____

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_____

Signature from Organization Served

_____

Title