San Antonio College Service-Learning Time Sheet

Attention students: Please use this form to record the number of hours that you serve. Return the completed form to your instructor no later than _____.

Student name_____ **Phone** _____

Agency name: _____

Supervisor: _____ **Phone :** _____

Instructor name: _____ **Course:** _____

Date	Time In	Time Out	Total Hours	Signature by supervisor
			Total Hours:	

Please Sign:

Student Signature: _____

Supervisor Signature: _____

Instructor Signature: _____

Revised August 31, 2007