Student Service-Learning Hourly Report

Students, please use this form to record the number of hours that you serve and learn. When you have completed either your service-learning project or appropriate hours set-up by your instructor, please turn this form into your instructor. *

Student's name:_____

Professor's name_____

Supervisor's name_____

Agency/Organization_____

Date	Time In	Time Out	Total Hours	Initialed by Supervisor

***Attention Professors:**
Please return this form with Agency Evaluation to Tracy Edwards, AD 200. This is important for record keeping/ award certificates.