



Braden River High School Community / Volunteer Service Log & Evaluation

Project Number
(Group Projects Only)

This log must be completed each day of participation in the Volunteer/Community Service Project. Time will not be included unless verified by the project supervisor as confirmed by initialing the form where indicated. This form may only be submitted at the completion of the project.

Student Name _____

DATE	Activity / Service Performed	START TIME	END TIME	TOTAL	Supervisor's Initials
Total Hours (round to the nearest quarter hour)				_____ hours	

Evaluation— Please describe below what you learned from your volunteer service project:

Student Signature

Parent Signature

Service Project Supervisor Signature

Volunteer Service Coordinator Approval