



INTERNATIONAL
COMMUNITY SCHOOL

ICS Community Service Time Sheet

Please fill out this form in its entirety including the description of the service performed. An incomplete form cannot be processed.

Student's Name
Community Service Organization
Name of Supervisor
Signature of Supervisor
Contact number or email

Please record the information for each individual time period that you worked. This includes when you worked multiple time periods on the same day.

Date	Time started and finished	Total for the day

Total number of hours worked _____

Please write a brief description of the service that you performed. If incomplete, this form will not be processed.

Return completed form to the high school office of the International Community School, 341 North Orlando Avenue, Maitland, Florida, 32751.

For office use only Approved _____ # of Hours _____ PowerSchool _____ Date _____