UNIVERSITY OF GEORGIA
Student Conduct
*Student Affairs*

# COMMUNITY SERVICE TIME SHEET

**Student Information**

Name:_____

Phone #: _____

**Agency Information**

Agency:_____

Supervisor & Phone #: _____

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**STUDENT**: In accordance with the decision you received, you must complete your community service at an agency listed on the Office of Student Conduct (OSC) website (**http:s://conduct.uga.edu/content_page/community-service-sites-content-page**). Hours completed at an agency outside of those listed on the webpage will not be accepted toward completion of your sanction unless they have been approved by OSC.

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**TO BE COMPLETED BY SUPERVISOR:**

I,_____, verify that the above student has completed a total of_____hours with this agency.

Supervisor's Signature:_____Date: _____

**CLS VERIFICATION: To verify participation in the group reflection, the facilitator from the Center for Leadership and Service MUST sign the form.**

I,_____, verify that the above student has completed the group reflection with the Center for Leadership and Service as a part of their community service sanctioning for the Office of Student Conduct.

Facilitator's Signature:_____Date: _____