"ABOVE & BEYOND" RECORD OF COMMUNITY SERVICE

Name _____ B#_____ Email _____@my.bridgevalley.edu Phone _____

Submit as many pages as necessary for the 100 hour minimum. Completed forms go to Acqua Fyall in 032 B2000 or Jeanne Smith in 413 Davis Hall.

Date of service (Only one day per line)	Sponsoring Agency or Event (BridgeValley Alternative Spring Break, Pumpkin Drop, Family Fun Night, Habitat for Humanity, Red Cross, Union Mission, etc.)	Type of service (Flood cleanup, worked food pantry, served as a judge, etc.)	Name of Supervisor (Signature is NOT required)	Supervisor's Contact Information (Email address or phone number)	Number of hours worked
				TOTAL HOURS	

I certify the hours documented above are accurate to the best of my knowledge and were completed during my enrollment at BridgeValley CTC.

Signature _____ Date _____