

## MHS Silver Cord Log Form

Name: \_\_\_\_\_

Graduation Year: \_\_\_\_\_

Date of Community Service: \_\_\_\_\_

*must include year*

Organization: \_\_\_\_\_

*must be a non-profit org.*

\*Hours Spent Volunteering: \_\_\_\_\_

*(List time spent and number of total hours. Example 5:00-9:00pm, 4 hours)*

*\*If you did an activity over multiple days, months, attach an itemized log and list total hours above*

Summary of the Service Completed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Print- Name of supervisor of service hours*

\_\_\_\_\_  
*Title of supervisor*

\_\_\_\_\_  
*Number of contact to verify*

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