CHS Key Club Service Hours Form – _**Individual Hours**_   **Date of Project:** _____

Name of Student: _____   **Grade:**   9   10   11   12
            (first)   (last)

Project Name: _____

_____   **Total Hours:** _____

Print Name of Supervisor: _____   **Supervisor's Phone #:** _____

Signature of Supervisor: _____
    (Or Key Club Board Member that is present)

Do not write in here – Office use only!
Date Entered: _____ Initials: _____

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