

**RECORD OF SERVICE HOURS
2017-2018**

NAME OF PARENT(S) _____

NAME(S) OF STUDENT(S) _____

SERVICE RENDERED (Work Day, Concessions, Santa Store, etc.)

NUMBER OF HOURS

_____	_____
_____	_____
_____	_____
_____	_____
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_____	_____
_____	_____

TOTAL NUMBER OF HOURS COMPLETED

- I have completed my service hours for the 2017-2018 school year as indicated above.
- I have opted to pay the \$200.00 assessment in lieu of submitting service hours and have already paid for the year.
- I have opted to pay the \$200.00 assessment in lieu of submitting service hours. Please find my payment of \$200.00 attached.
- I have completed a portion of my service hours to the school (listed above) and have attached a partial payment in the amount of \$10.00 per hour to cover the remaining hours.