



SERVICE COUNCIL — TIME SHEET

Complete time sheets weekly. Turn in to Linnie Spor's mail box at the Thayne Center for Service & Learning.

SERVICE COUNCIL MEMBER NAME: _____

DAY	DATE (mm/dd/yy)	HOURS	WHAT DID YOU DO?
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			
SUNDAY			
TOTAL HOURS =			

Service Council Member Signature 	COMMENTS
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