

**SERVICE HOURS - The Prairie School**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Advisor: \_\_\_\_\_

Dates or time period of service: \_\_\_\_\_

Number of service hours earned: \_\_\_\_\_

Description of service performed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Comments (optional): \_\_\_\_\_

\_\_\_\_\_

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