

## Community Service Report

The purpose of the Community Service Report is to track the number of community service hours completed by members of your chapter and the Angelo State Greek community. Please complete this form after each community service event attended by members of your fraternity or sorority.

Fraternity/Sorority: \_\_\_\_\_

Name of Person completing report: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone #: \_\_\_\_\_

Community Service Agency: \_\_\_\_\_

Contact Person at Agency: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone #: \_\_\_\_\_

Date service was completed: \_\_\_\_\_ # of members in attendance: \_\_\_\_\_

Total Hours Served for All Members: \_\_\_\_\_

Description of Community Service Provided:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Optional: Attach roster of members who attended the event