Community Service Reporting Form

The University Student Conduct System, represented by ____________, has an agreement with the student listed below to complete _____ hours of Community Service by ____________ (date).

Student Name: ________________  Student ID: ________________  Incident Date: ____________

Phone No. ____________________  ____________________________

Student Signature                  Date

______________________________  ____________________________
Student Conduct Representative     Date

DIRECTIONS

Step 1: Locate a venue to complete your hours. Please review the Community Service listing with the student conduct representative or visit the Community Service Volunteer Opportunities listing at www.coastal.edu/conduct and select “Student Conduct Information for Students” followed by “Community Service Volunteer Opportunities”.

Step 2: Contact the agency/contact to schedule your hours.

Step 3: Complete and log Community Services Hours (on page 2 of this form)

Step 4: Sign and Return this completed 2 page form to the Dean of Students Office at any of the following:
- Kearns Hall, Suite 105
- UP Grand Strand, Bldg. 102
- Fax to 843-349-2316, or
- Email to conduct@coastal.edu.

Service hours may not be completed with an organization to which a student is affiliated. Service hours must be separate from pre-existing commitments. Examples of these commitments include: fraternity/sorority life, athletics, employment, and other clubs/organizations.

All service hours must be performed and completed in person. Service hours completed online will not be accepted.

Any and all hours submitted will be verified by the Dean of Students Office.
# Community Service Hours

**Student’s Name:**
**Community Service hours:**
**ID**
**Hearing Officer:**
**Incident Date:**

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<th>Date</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours</th>
<th>Manager/Designee Signature and Printed Name</th>
<th>Agency Name</th>
<th>Phone Number</th>
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*With my signature below, I certify that the above information is true and accurate.*

______________________________   __________________________
**Signature of Student**   **Date**

**TOTAL HOURS**

****Failure to return this form by the deadline will result in a hold being placed on your account.****