



Freddie T. Davy Honors College
Hampton University
Hampton, VA 23668

RECORD OF COMMUNITY SERVICE

Student's Name:

Name and Address of Volunteer Service Agency:

Description of Service:

Date(s) of Service:

Total Service Hours: _____

Direct Supervisor's Name:

Supervisor's Phone Number:

Supervisor's Email Address:

Supervisor's Comments:

Student's Signature

Date

Supervisor's Signature

Date