ARDENNE HIGH SCHOOL
COMMUNITY SERVICE PROGRAMME
10 Ardenne Road, Kingston 10
Tel: (876) 927-8138 Fax: (876) 927-4784

AHS/CSP/ASL/26-27

STUDENT TIME CARD

Name: _____

Year _____ to _____ Class: _____

House _____

Date	Activity/Service/Project	Log-in Time	Log-out Time	No. of hours	Supervisor's Signature

Committed to serve as we …Seek the Best

This form should be kept by students and signed by the supervisor at the end of each visit or completion of each task.